

“You have to be willing to change!”

A case study of hospital employees' experiences with a restructuring project seen in the light of Scott and Jaffe's change curve

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Abstract

Health reforms and an increasing demand for quality and effectiveness have put pressure on the health care sector. The increased need for innovation requires the health sector to undertake certain moves, and constant changes have become a focal point for the hospitals. The fact of undergoing continuous changes would without doubt have an effect on the employees. The purpose of this thesis has been to investigate the experiences of hospital employees when undergoing a restructuring process, and to investigate whether their reactions could be seen in connection with the noted change curve theory of Scott and Jaffe (1989).

The data material in this study was collected by conducting qualitative research interviews with eight informants employed at a ward in a large Norwegian hospital, which recently had undergone a restructuring process. The qualitative method was chosen to illuminate the individual's experiences with restructuring.

The analyses show that the majority of informants were positive to the restructuring project. Their transit through the change curve was rapid and any prospective notions of resistance were insignificant and easily overcome. Those of the informants who displayed major reluctance to the project seemed to sustain negative throughout the process. The informants did not recognize any large outcomes of the project as such, but found the process to be rewarding in terms of creating a better understanding between the employees.

The findings indicate that the employees at this particular ward do not react to change fully in accordance with the change curve of Scott and Jaffe. Their responses to change are more positive and the curve is more deftly transited than the change theory suggest. However, the study provides insight into how hospital employees react to and experiences the contemporary situation of restructuring and changes in their work place.

Acknowledgements

This master thesis revolves around change, and the experiences and consequences this puts on the individual. While finishing this thesis, I am about to face some great alterations of my own. An important and eventful chapter in my life, the student life, is coming to an end, and I have to readjust. Hopefully, my transit through the change curve towards committing to my new reality will be quick and easy. However, when writing this master thesis I went through all stages of the transition process. Finally finishing makes room for some reflections. The thesis is my product, but several people deserve my acknowledgements:

First and foremost, I would like to give my sincere thanks to my eight informants, who took their time to help me out, during their busy day. The thesis would not have happened without you. I would also like to thank my supervisor Lars Erik Kjekshus, for giving me valuable inputs and feedback along the way.

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*“The art of progress is to preserve order amid change
and to preserve change amid order”
-Alfred North Whitehead*

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1. Introduction

“The times they are a-changin’”. Those very words written in 1963, one of Bob Dylan’s most famous songs refers to the political and social upheaval that characterized the 1960s. However, the times have continued to change, in many ways. The changes in today’s society are faster, more extensive and more profound than earlier (Grønhaug et al, 2001, chap. 14). This applies to the working life as well. Changing and restructuring the organization has become a part of an organization’s everyday life. The health services in general, and in this thesis, the hospitals in particular, are no exception. The nature of the health care system is in itself unpredictable and fundamentally unknowable (Weiner, Helfrich & Hernandez, 2006). According to this, operating a health care organization would inevitably be difficult, not to mention a health care organization undergoing change. Hence, the members of the health care organization would face some difficulties during a restructuring or readjustment process. The focus in this thesis is how the members of a health care organization, namely members of a hospital ward, experience and react to a restructuring project.

1.1 Background for the study

I spent my internship at a hospital ward that was in the middle of a restructuring process. The mandate of that particular restructuring project was how the department could contribute to reduce waiting lists and improve the services to referrers, mainly internally at the hospital. I participated in work groups and observed the employees. When observing the members conducting their tasks at the ward parallel with working in the groups, I started to wonder how this affected them, both at work and in their daily life, since they did not seem to be released from their daily routine when working in the project. The subject of organizational change is interesting from a broader aspect as well, since the department where I spent my internship is not exceptional.

1.2 Former studies

To understand how individuals react while undergoing changes, like a major restructuring process, it is important to understand why they act as they do. I want to look into some former empirical studies that have been conducted on the matter of employees and experiences of restructuring; to see what the empirics tell me about how they have reacted. There have been conducted several studies on the matter of employees and restructuring, from different points of view. The experiences from these studies are mixed:

The Norwegian “Arbeidsforskningsinstituttet” conducted a quantitative study in 1998 based on work environment and restructuring, in which they concluded that system modifications led to increased intensity and decreased sense of mastering in the work place (Grimsmo & Hilsen, 2000). Another quantitative study, concerning alterations in well-being amongst employees in the health care sector was conducted in 1997. The main focus was to create an image of how the employees experienced the restructuring, especially regarding job satisfaction and work environment. The conclusions of this study were that the information about the restructuring was too poor, but the overall work environment were experienced as good. The attitude towards the restructuring process amongst the employees was mainly positive (Bjerke, 1997).

An analysis of structural changes at Rigshospitalet in Denmark showed that the professionals experienced the restructuring process as intense and stressful, and the project released a lot of anger and frustration. The potential loss of influence and altering of tasks were the main reasons behind the resistance, but the members became increasingly dedicated, and the process created a foundation for change. Communication and openness about the change was critical, along with maintaining the original goals in spite of resistance (Eriksen, 1997).

A study of alteration processes in Helse Nord concluded that even if the change process in itself is good, the changes are not necessary successfully implemented. Certain critical factors have to be present, such as employee ownership, involvement, participation and cooperation, if the projects are to succeed. The project managers play an important part in fulfilling these criteria (Sandberg & Larsen, 2007).

Roald (2000) conducted a study of employee experience of structural change in two Norwegian hospitals. Different comprehension and interpretation of vague goals lead to

resistance among the employees. The differing cultures between the two hospitals subject to the merger delayed the process, and there were few positive outcomes. The employees were insecure regarding the future in connection with the restructuring process (Roald, 2000).

The studies have somewhat different outcomes, but there are still some similarities. Restructuring creates insecurity, increased intensity and dissatisfaction in the workplace. The main attitude towards restructuring was negative, although with some exceptions. The negativity is reduced when the employees are encouraged to participate, which shows the importance of involvement. If I were to carry these results forward to my study of how hospital employees' experience a restructuring process I should expect to find that the employees are mainly negative to the process, but their attitudes should be altered with the encouragement from the managers.

1.3 Delimitation and research question

Studying organizational change and learning is a broad topic, which could be approached from many angles. A lot of restructuring processes looks at structures, systems and cultures. These are important aspects of a change process, but even more conclusive for the process is the alteration of human behaviour by influencing their points of view, attitudes and emotions. A successful restructuring process is all about the people involved (Nordhaug et al, 2007, chap. 2). It is the experiences individuals have with a restructuring project, and not the goals and the outcome of the project that has the centre of attention in my study. With my thesis I wanted to focus on employees in a hospital ward who underwent a restructuring process. I wanted to learn about their experiences with the project, and how their attitudes to the project changed during the course. In order to understand their reactions and how they changed, I chose to substantiate my study on Scott and Jaffe's change theory. This theory is founded on established knowledge of reactions to sudden non-planned changes which the individual experiences as a threat and has little control over. The pattern of reactions in situations consists of certain typical elements and is commonly divided into four stages (Grønhaug et al, 2001, chap. 14). This culminates in the following research question:

“How do hospital employees' experience a restructuring process, and how do their reactions fit in accordance to Scott and Jaffe's change curve?”

2. Restructuring health care

The Norwegian health care system and its hospitals have been subjected to some major changes during the last decades, legal, financial and organizational. The most extensive was probably when the state took over the ownership of the hospitals from the hospitals. There have also been changes in the population's demands for health, with all its implications (Behovsbasert finansiering av helsetjenesten, 2003, p. 36). These alterations have brought along increased pressure on the hospitals and have in turn led to different changes locally within the hospitals. Changes in hospitals could be difficult to conduct. Even small and sensible alteration processes could have large extended effects. A hospital as such is also a very complex and professionalized system. The ideas that actually get carried through are often those that are not in conflict with existing tradition, and the level of innovation is limited (Borum, 1997). The most fundamental task in the health care sector is to treat patients, but with the constant restructuring processes; this focus could shift or diminish. The individual employee, who wants to be conscientious, could face some difficulties in this. It is hard for an employee to prioritize to work with the restructuring rather than the patients that cannot wait (Holter et al, 1998). In this section I want to give a description of the restructuring project this thesis revolves around. It is also necessary to give a short description of the ward in which the restructuring project took place, because it could be distinctive for how the restructuring process went.

2.1 The ward in subject

The ward in which I spent my internship, and which my informants are employed, is an outpatient clinic at a large Norwegian hospital. The hospital was subject to a merger a few years back, and the ward was connected with another. Physically, the ward is located at two different sites. The employees at the two locations are also psychologically distant from each other. All of the employees have not recovered from the merger, and they have a hard time adjusting to their new situation. There is still a different culture and colliding interests between the two locations. Among the employees at the smallest location there is a fear that their part of the ward is going to be shut down, while those at the bigger location thinks of their complaints as nagging.

2.2 The restructuring project

The restructuring project was initiated during the summer of 2007, as a part of a larger restructuring project at the hospital as a whole. The mandate of the project was to contribute to reduce waiting lists and improve the services to referring clinics. The project aimed at looking at every process that could lead to improvement, like altering work processes, enhanced interaction with other departments at the hospital, efficient utilization of equipment and localization of examination. The ward should organize its activities mostly adequate in order to meet the patients' demand for an efficient examination and treatment of good quality. The project should also result in gains, professional, financial and organizational. But just as important, yet not stated in the mandate, was to create a better understanding between the locations, and to emphasise the notion of being *one* ward, and look past the divide. By increasing the affinity inside the ward, the available resources could be utilized better, which could also lead to a better patient treatment. The work groups in the project were therefore compounded of members from both locations, and also with members of different professions. The aim was to realize the interdependence in the wards. The management required broad participation, also from those not directly involved in the work groups. The project was divided into three different phases; the *diagnostic* phase with data collection and analysis, and charting the areas of improvement. The *solution* phase aimed at identifying causes and developing solutions to each identified area with potential improvement, and verifying the improvements. The *implementation* phase dealt with planning the implementation; creating a plan of action, disperse responsibilities and developing a follow-up system. Each phase was concluded with a meeting in the steering committee, where the head of each group presented their results so far. The steering committee managed the project and made the formal decisions, and was composed of the project owner, the project manager, and the head of the department. They were also assisted by internal advisors; the hospital has its own unit that provides technical assistance to the wards in cases of alteration and coordination. They also had additional meetings in which the group members had no access. The employees were not directly involved with the decision-making, but were encouraged to participate and make suggestions, either directly to the members of the steering committee, or to members of the work groups. Information about the project was given at the weekly section meeting.

3. Theoretical framework

It has been stated that every change in an organization would involve resistance in various forms and degrees (Grønhaug et al., 2001, chap. 14). It is therefore necessary to look into some motives behind resistance. Scott and Jaffe's theory of change gives an account of how people in organizations react to changes they have not wanted, chosen or made plans for (Scott and Jaffe, 1989, chap. 3). I want to see how the employees in the hospital ward experienced and reacted to an organizational change and see if this change theory was applicable to their reactions. A thorough representation of Scott and Jaffe's theory are given in section 3.2. At the end of the chapter I have also included sections about how to manage change and some criteria for successful restructuring.

3.1 Resistance to change

The health care sector faces changing environments, which require a lot from the employees. Great upheaval and restructuring has become common in an ever-changing hospital's daily routine. The opportunities to carry out the planned changes into effect depend on several conditions. How the employees react to these changes is one of them.

3.1.1 Motives behind resistance

Resistance to change is a frequent phenomenon, and it may take on different forms. It could be rooted in the wish to maintain the status quo, but also in desiring another change than that of the change agent. According to Høst (2005) there are several important motives behind resistance. Lack of confidence towards those initiating change is one of them. The employees do not trust the object of those who made the initiative to the change process; they fear a hidden agenda. They might also lack trust in the initiators' matter of judgement. Believing that the change is not necessary is another motive. The employees do not recognize any obvious need for alterations. They don't believe that changing the organization would solve the problems, if any. The employees could also believe that the change is impossible. The employees lack faith in the success of the suggested change. They might find the project unrealistic to accomplish. Another motive for resisting the change is

the impression of the project being too costly. The project would consume too many resources; and the utility of allocating resources to a restructuring process is regarded as low. The fear of the unknown is also a reason for resistance. The transition from something familiar to something new and unknown seems intimidating. The employees may feel insecure and afraid that they will not be able to master the tasks that arise from the alteration process. Some employees might resist the interference from others, and hence the change because they oppose being controlled by others. Any forced alteration would lead to hostility and indignation. The increased work level that arises from a restructuring project is yet another common factor of resistance. In a restructuring process, the employees might have to carry out new tasks on top of those they normally do. For the members of a hospital ward this would mean working with the project along with full clinical activity. The workload increases, and resistance to the change may arise. Finally, the environment in the organization will often be altered during a change project. Both social and professional environment might alter when the ward is going to a restructuring process. Close colleagues might be scattered from each other, and the breaking of social bonds may lead to both loss and resistance (Høst, 2005, chap. 7). A different aspect of the resistance to change is that the employees' feeling of resistance does not necessarily have to be irrational or unfounded. Those opposing the change might recognize some factors which the managers have not; for instance that the planned change will not result in the goals that are set for the organization (*ibid*).

3.1.2 Identifying resistance

Resistance could take on several forms among the employees, and could manifest itself in different signs, according to Maurer (1996) in Grønhaug (2001). One of them is *confusion*. Even with thorough information about the project and the new situation, the information seems to have difficulties in sinking in. It could seem as though the employees, who are usually very reasonable and bright do not seem to understand, let alone listen (Grønhaug et al, 2001, chap. 14). This could resemble denial. The people seem to refuse to see things in a different way. The more the managers seem to explain and argue in favour of the project, the more withdrawn the employees seem to get. Whenever the difficult subject is brought up, the employees move their attention to something less intimidating (*ibid*). The resistance could also reveal itself as direct criticism. People express their negativity and rejection, without

appearing to consider the possibilities of the change. This could be expressed as overt hostility, in the form of protests and even sabotage. But resistance could also be carried out as a silent protest, when the employees seems positive and eager on the outside, but fail to live up to their promises (*ibid*).

3.1.3 Understandig loss

Changes happen when something ends in order to bring forward something new. In the period of transit it is important to be able to let go of the old and familiar, and move towards something new and unacquainted. Even though the change is being experienced as something positive, it will have a certain psychological effect. Most people have a strong reaction to any change, and this is often experienced as a loss. It is important that this is understood and acknowledged by the managers. The employees may experience several types of loss, and in order to lead people into a new direction, it is necessary to handle their loss (Scott and Jaffe, 1989, chap. 3). Loss could become apparent as the loss of security that the employees no longer feel in control of what the future will bring, or where they stand in the organization. It could also be seen as the loss of competence. They are insecure when it comes to doing new tasks, and it is hard to admit to others if they don't know how to do something. Loss of relationships may also occur. The familiar contact with colleagues could disappear after a change, and people often lose their sense of belonging to a group or organization. A more severe loss could occur if the change implied reductions in the workforce, or even a liquidation of the organization. Each loss is connected with a cost, and could trigger an emotional response that resembles grief. This is a natural response, and people have to be allowed to express their feelings. People who do not seem to display any feeling of loss are often repressing it, and could have problems adjusting to the change. The transition period could go easier and more rapidly when the loss is expressed and acknowledged and it is important that the manager understands that a loss has occurred. Unacknowledged loss could lead to resistance and disruption at a later stage (*ibid*).

3.2 Scott and Jaffe's change curve

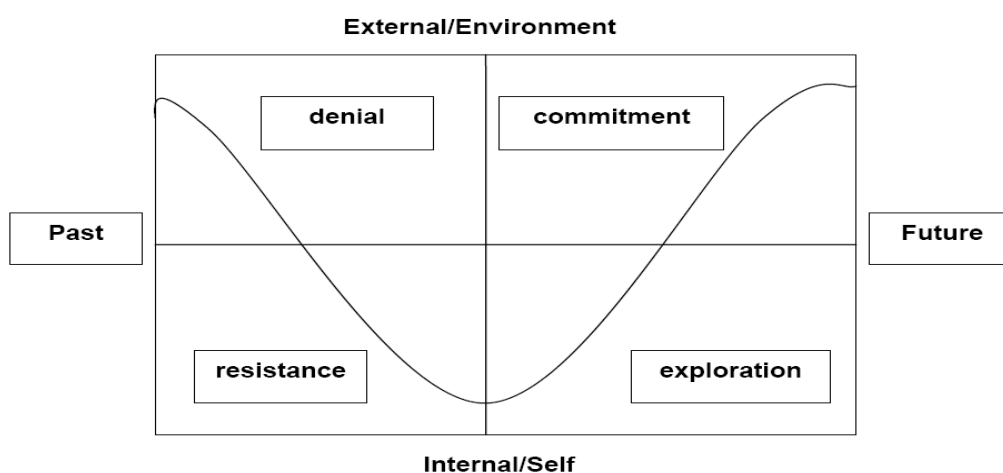
The purpose of my study is to investigate how the members of a hospital ward experience a restructuring process and how their reactions fit with Scott & Jaffe's theory of change. This

theory gives an account of how the people in organizations react to changes they have not themselves wanted, chosen or made plans for, based on knowledge of reactions to traumatic incidents, such as accidents or severe illness. These incidents are sudden and unforeseen, and they represent a threat to something important to the individuals. They have, at the same time, limited or no control over what is going on. (Grønhaug et al, 2001, chap. 14). The reaction pattern contains certain elements and is commonly divided into four stages.

3.2.1 The transition grid

When undergoing a restructuring process, the people involved will normally go through different stages. Change often involves elements of both danger and opportunity. In the initial phase, when people first approach a change, the first response might be to consider the change as a threat. People will then fear and resist the change (Scott and Jaffe, 1989, chap. 3). But after a while, the people involved will start to get used to the change. They might recognize the change as something that could bring about new opportunities, and guide the organization onto higher levels. As soon as the employees accept the change as a ground for new opportunities and possibilities, the change is well on its way to be implemented successfully (*ibid*). The notions of threat and opportunity can further be subdivided into two stages each. Threat can be subdivided into *denial* and *resistance*, while opportunity subdivides into *exploration* and *commitment*. These form the model of four phases which people commonly pass through when undergoing change:

Scott and Jaffe's Transition Grid:



(Scott and Jaffe in "Managing the Change Workbook")

The figure above depicts a graphical presentation of the four stages of the transition process. The curve in the figure shows the typical course of reactions. The horizontal axis illustrates how the focus moves from the past to the future, from the way things were to the way things might become. The vertical axis shows how the attention shifts from external incidents to internal thoughts and emotions, and vice versa (Grønhaug et al, 2001, chap. 14). Changes in an organization, like a restructuring project, will transport the members through these different stages in their alteration process. Most people go through these stages in every transition. However, the way or pace in which they go through differs a great deal. Some might go quickly through the different stages; others may be stagnant in different stages (Scott and Jaffe, 1989, chap. 3). The intensity of reactions may also vary greatly, and are dependant of the employees' personality, former experiences and social support. Some employees seem to remain in the first stages, however most employees seem to move through all four stages fairly well. The principal direction through the change curve is from denial to commitment, but relapses into earlier stages could occur, especially to the resistance stage (Grønhaug et al, 2001, chap. 14). When the information about the project has started to sink in, many employees react by experiencing the project as a threat or danger, their spirits sink, and they will eventually hit the bottom in their pattern of reactions. However, as their feelings are digested, they will eventually see the project as an opportunity to improve, and their reactions and experiences become of a more positive nature. The transition moves from the way the things were used to be done, towards a new way of seeing and doing things in the future. During change, people tend to focus on the past, denying the change. Then they start to go through a period of preoccupation, where their minds and thoughts are concerned with how the situation will affect them, and resistance is a common reaction at this stage. As the employees enter the phases of exploration and commitment, respectively, they start to look forward; towards the future and the opportunities that may arise (Scott and Jaffe, 1989, chap. 3). The different stages are described more thoroughly in the following sections:

3.2.2 The denial stage

Denial is often regarded as the first reaction to change. When something denunciatory occurs, like the information regarding change, such as a restructuring project, the initial reaction among the employees is generally numbness. The information does not seem to get

to the employees and nothing much happens. They do not seem to understand what is actually going on, or what it will imply. The employees continue as usual and it does not seem as though anything is affected by the change (Scott & Jaffe, 1989, chap. 3). The denial stage could be extended beyond its boundaries if the employees are not encouraged to express their emotions and reactions. The manager has to actively stand by and present the realities clearly and crisply; and give the employees enough time to let the truth sink in (Grønhaug et al, 2001, chap. 14). Denial could be damaging because it hinders the natural way of healing from the loss it is to move from the old way of doing this to another one. If the employees continue to concentrate their attention on the way things used to be, rather than how they eventually will develop because of the change, they will be neglecting both themselves and their future. A problematic issue in the denial phase is that managers may misinterpret the lack of engagement and blindness to problems as a sudden move into the final stage of commitment (Scott & Jaffe, 1989, chap. 3).

3.2.3 The resistance stage

The feeling of resistance commences when the employees start to comprehend their reality, both regarding what is going on and how it will affect them. The reactions have moved from numbness to such as agony, depression, anger, frustration, sadness or uncertainty, in various forms and degrees (Scott & Jaffe, 1989, chap. 3). The reactions could be directed towards the surroundings as accusations, indignations or pleas, or they could be directed inwards such as self-reproach, self-pity or loss of self-respect. The thoughts and minds are often chaotic, and feelings of helplessness and hopelessness could strike the ability to assess and deal with the situation. Mistakes are easily made, and the productivity is usually declining. Some of the employees will tend to withdraw themselves, while others are protesting more openly, disclaim any responsibility or refuse to follow orders, or even try to sabotage the change order. In times like these, absence due to sickness is commonly increasing (Grønhaug et al., 2001, chap. 14). Some types of organizational change have high negative impact on the employees. When a ward or a company is merged or there are lay-offs, the employees feel a great loss. People focus on what the impact of the change means to them personally (Scott and Jaffe, 1989, chap. 3). At this stage, it is important to allow people to express their feelings and share their experiences. When people share their reactions with other colleagues, and realise that they are not the only ones having these emotions, they

make each other go through the phase faster. In organizations with closed cultures, and no room for sharing experiences and emotions, the employees will have to keep their uncertainties to themselves and the resistance stage may be prolonged. In order for the employees, and eventually the organization, to change, it is necessary to be able to express feelings. Resistance is a normal response to change, and they need a smooth way of leaving the old and starting a fresh chapter. At a certain point, everyone has reached the bottom point, and start to move upwards on the other side of the change curve. This shift in the curve is experienced differently for each individual, but it indicates that things are starting to get better. When the employees yet again gain interest in their work, it signals that the resistance stage is passing (*ibid*).

3.2.4 The exploration stage

During this stage, the individuals regain their strength, and they are able to focus their attention on the project and the future. This could however become a quite chaotic stage, as people would have to find new ways to relate to each other, find new ways to organize their work and learn more about their future. This could be stressful for those who are in need of a well-defined structure. A lot of questions are being raised, and there is an active debate, which could both be exciting and exhilarating. Some people join in with enthusiasm, while others are more apprehensive or confused. The employees might have to play other parts than they were used to, and new relational structures are created. There is a lot of energy and new ideas are present, but it could be difficult to have a clear focus (Scott & Jaffe, 1989, chap.3).

3.2.5 The commitment stage

After a period of investigating, experimenting and testing, the employees start to see the outline of a new structure. They are now ready to commit. During this stage, the employees are prepared to aim their focus at a plan, and a sense of willingness to make the plans work arise. They have realised the importance of learning new ways to cooperate, and have re-negotiated roles and expectations. The members of the organization have committed to the values and actions that are required in the new phase. The individuals are ready to identify with a set of goals and how to reach them. The commitment stage will subsist until a new change cycle is initiated (Scott & Jaffe, 1989, chap. 3).

3.2.6 Applying the change curve

Scott and Jaffe's change curve could be applied on several matters. It could provide a basis on how to predict the reactions to the organizational change among the members (Grønhaug et al, 2001, chap. 14). In my thesis, I have chosen to use the model as a guideline for reaction patterns, and seeing if my informants react accordingly. The model could also be of great importance when diagnosing where individuals, teams or the organizations as a whole find themselves in the restructuring process. This is especially important for the managers. Hence, they are made able to make the necessary allowances regarding the amount of time it takes for the employees to pass through the different stages, and should not attempt to activate measures estimated at one stage whilst most employees are at a different stage. The main challenge for the management is to help both themselves and their employees through all of the four stages in a good manner. It is crucial that the change curve is being recognized as curve of both learning and mastering. If the management wants genuine change in the way of thinking and action in the organization, the reaction patterns has to be seen as something natural, favourable and necessary, as opposed to something unwanted and harmful for the alteration process (*ibid*). The managers' role in the different stages plays an important part in how the employees, both as individuals and the organization as a whole, are able to go through and experience the restructuring process. It is important to ensure that all the employees get an insight in the dynamics of the curve, and that there is made room for the possible reactions that may arise from the process. By giving the employees a more active part in the accomplishment of the project, they gain more ownership, and the chance of success increases (*ibid*).

3.3 Managing change

Changes in the organization involve both threats and positive opportunities. The notion of resistance and danger dominates in the two first stages, while the possibility of new opportunities makes its appearance more vigorous in the latter stages. Some employees go through the four stages rather rapidly, while others tend to need more time. In certain cases, some of the employees might remain in one of the stages for such a long time that taking further actions is made necessary (Grønhaug et al, 2001, chap. 14). This applies especially when the employees linger in the stage of resistance. Any change process in an organization

of a certain size and significance will trigger various forms and degrees of resistance. If the resistance towards change channels too much negative energy and reluctance amongst the employees, then the change could be difficult or even impossible to implement. The managers then face some great challenges in handling the resistance in a reasonable manner (*ibid*). As a starting point, the manager should take into account the reasons why the people would probably resist the change, and create a change strategy succeeding this. DuBrin (1992) presents Kurt Lewin's three-step analysis of the change process, starting with *unfreezing*, which involves reducing or eliminating resistance to change, because as long as the employees withstand themselves, it will never be fully implemented. To accept change, the employees involved must deal with and resolve their feelings about letting go of the old. People will only be ready to make transitions after they have dealt successfully with endings. Moving to a new level is the next step, which acknowledges the importance of communication. Those implementing the change make suggestions and encourage the employees to contribute and participate. *Refreezing the status quo* implies that the success factors of the change should be pointed out, and the people involved in implementing the change should be rewarded (Lewin, 1964 in Dubrin, 1992, chap. 16). However, the most important way to reduce resistance to change is by allowing people to participate in the project. To ensure this is to allow the employees to make their own rules in order to increase compliance, because when people are involved in making rules of behaviour, they are less likely to violate them (DuBrin, 1992, chap. 16). The management has an important task in leading the team through organizational changes. Being the leader in times of change is however not an easy task. The managers may be responsible for additional people, and different challenges. To succeed, the manager has to attain a view of where the group is going, to share these views with his employees and create an environment where the employees want to participate in reach this view (Scott & Jaffe, 1989, chap.4). However, the employees could also help themselves and the organizational by applying some techniques of mastering. First and foremost, the employees need to console themselves with the fact that reactions to change such as anger, depression and shock are natural. They have to give themselves permission to feel what they are feeling. To accept and focus on negative reactions is not the same as wallowing in them (Jick and Peiperl, 2003).

3.4 Criterias for successful restructuring

“People change by being led; not by being told” (Scott & Jaffe, 1989: 24).

A common misbelief is that people will change if they are ordered to. However, the usual response to this is resistance, defensiveness and withdrawal. People do not normally change their behaviour by being given information, but by relating to the problem together with others. The more involved the manager is with the team, and the more involved they are with each other, the easier the change project will succeed (Scott & Jaffe, 1989, chap. 3). Because resistance to change is a common phenomenon, a solution is to create incentives for those who adapt to the change. Examples of such incentives could be to reward those who remove obstacles to change, to give special bonuses to those acquiring the new skills and work patterns that make the change successful or to incorporate good ideas and suggestions from employees as a routine on meetings (*ibid*). However, to implement change, it should not be necessary to reward people for doing an effort to adapt to the change. A task force at the General Electrics Management Development Centre identified some critical factors for a successful change, as described in Grønhaug et al, 2001: Primarily, the change process should be incorporated in the organization. The project should have its owner and manager, but every participant should be involved in bringing the change forward. It is important that all the employees gain understanding of the need to change, and that they understand why they should change or alter their behaviour. A clear vision of the desired effects and outcomes of the project should be stated and communicated to the employees. A sense of commitment to the change should be created, in identifying, involving and convincing the participants. The resistance to change should be surmounted, and replaced by engagement and commitment. The progress of the project should be supervised, by defining milestones and methods to measure progression. Finally, the management should make the change persistent, by ensuring that the change happens by creating plans to continuous accomplishment and commitment (Grønhaug et al, 2001, chap. 14).

4. Methodology

Methodology is a tool which is used when investigating different matters. This chapter deals with how the study was conducted methodologically; the choices I made and the problems that arose along the way in my study of hospital employees' experiences with restructuring.

4.1 Choice of methodological approach

In order to acquire information about the hospital employees' experiences and reactions, I wanted to make use of a qualitative methodological approach. An overarching goal for qualitative studies is to develop an understanding of a phenomenon, connected to individuals in their own social context. The aim is to get an insight into how people deal with their situation (Dalen, 2004). Qualitative methods shows how people make sense of their experience, and cannot easily be provided by using other methods (Liamputtong & Ezzy, 2005). When the purpose of research is to learn from participants in a process how they experience it, the meanings they put on it or how they interpret what they experience, then qualitative methods would be the best, if only solution (Morse & Richards, 2002).

I wanted to discover the informants' experiences, and the best way to collect such data material was by conducting interviews. Whilst conducting qualitative interviews, the researcher listens to the individual expressing his or hers own experiences, views and opinions. A qualitative research interview tries to understand how the world looks like from the informants' point of view (Kvale, 1996). I chose to make use of semi-structured interviews. Here the researcher should create an interview guide with some open ended questions in advance, but also allow room for complementing the answers with open, unplanned responses from the informant (Morse & Richards, 2002).

4.1.1 Phenomenology and case studies

When conducting a qualitative study, there are several methods to use. My topic requires the use of a method that pose questions about the core or essence of a phenomenon or experience (Morse & Richards, 2002). I wanted to investigate each individual's subjective experiences with restructuring, and how they would describe their reactions. Hence, I found

it useful to make use of phenomenological analysis. Phenomenology is a descriptive, reflective, interpretive and engaging mode of inquiry in order to deduce the essence of an experience (van Manen, 1990 in Morse & Richards, 2002). The foundation of phenomenology has its origin with the German philosopher Husserl, which considered experience to be the individual's perceptions of his presence in the world (Morse & Richards, 2002).

My study on experiences with restructuring is also a case study. The method of exploration here is aimed at collecting large amounts of information about a limited number of units or cases. A distinctive feature is that the focus of the analysis is aimed at one or more units in an empirically defined unity, like an organization or group (Thagaard, 2003). Case studies are in general the preferred strategy when "how" or "why" research questions are being posed where the researcher has little control over events, and when the focus is on a contemporary phenomenon within a real-life context (Yin, 1994). Restructuring at the work place could be considered as a current topic, and case studies are therefore appropriate for my study. My research question could also be described as a "how" question, and finally, I did not have any control over my informants experiences. Hence, my study meets the criteria of a case study.

4.2 Ethical guidelines

Qualitative research and the use of interviews to collect data pose certain ethical challenges. The personal interaction in an interview setting will affect the informant and it is therefore necessary for the researcher to be aware of certain ethical challenges that may arise at various stages of an interview investigation (Kvale, 1996). The society also claims that any scientific research should abide by certain guidelines (Dalen, 2004). Three important ethical guidelines for qualitative research are given a brief account in the following:

4.2.1 Informed consent

Research projects that require participation from informants should only commence after the participants have given their informed consent (NESH, 1999 in Dalen, 2004). Informed consent implies that the subjects of investigation are given information about the overall

purposes of the investigation and the main features of the design. It also involves obtaining the voluntary participation of the informant. Giving informed consent implies that the informants are given orientation about his or her participation in the research project in advance (Dalen, 2004).

While preparing for my interview sessions, I contacted my respondents via email in order to set up the appointments. When reconfirming the appointment I enclosed a note informing them about the purposes of the study together with a statement of their participation, which I wanted them to sign. At the time of the interview, I brought up the forms and made sure that the informants had read and understood the content. I also got their written statement. The forms are enclosed in a translated version in appendix I and II.

4.2.2 Confidentiality

The requirement of confidentiality is especially important when conducting qualitative research interviews, because of the tight connection between researcher and informant. The informants have to feel secure that the information they give during the interview is treated with confidence and could not be directed back to the respondent (Dalen, 2004). Confidentiality implies that private data which could identify the informants cannot be reported (Kvale, 1996). It further involves making the informants anonymous when presenting the results of the study. The researcher needs to respect and protect the informants' privacy (Thagaard, 2003). The protection of the informants' privacy by changing their names and other identifying factors is an important issue when presenting the study (Kvale, 1996). However, the principle of confidentiality is not utterly unproblematic. Methodically it would be correct to present the informant the way the persons concerned appear to the researcher, while ethically speaking, it is important to hide the informants' identity. This is problematic when the research is concentrated in small and transparent environments (Thagaard, 2003). Another difficult issue is the possibility of reproducing the data in other studies. The data cannot be reproduced without permission from the original informants. But the results of the study are difficult to check by other scientists if nobody knows who participated in the original study, nor where it was conducted (Kvale, 1996).

In my study I emphasized the anonymity of my respondents. I guaranteed their confidentiality, and promised them that nobody should be able to recognize them in the

study. Since the interviews were conducted in Norwegian, and the thesis is written in English, it should also be more difficult to recognize the individual informant for others, as any particular linguistic features the individual may have would be altered in the translation from Norwegian to English. It was important to me that the informants put their trust in me, to process the experiences they shared in a proper way. The notion of mutual trust was essential. I have to trust that the data the informants' give me are their true feelings and experiences, and they have to trust that I am able to use this information properly.

4.2.3 Consequences

The ethical principle of beneficence claims that the risk of harm to the research subject should be reduced to the least possible (Kvale, 1996). The researcher should act based on the respect of the interview subjects, and the informants should not be exposed to any increased risk of physical or emotional harm or liability (NESH, 1993 in Thagaard, 2003). The researcher has to consider the consequences the study might have upon the participants, and the ethical responsibility is to avoid that the research has any adverse effects (Thagaard, 2003). Ideally, there should be some sort of reciprocity in what the informants give of information and what they receive from participating (Kvale, 1996, Thagaard, 2003). By expressing their own feelings and experiences to a dedicated listener, they can often get the impression of taking part in a unique and positive experience (Kvale, 1996). However, the researcher has to be careful, as the openness and intimacy in an interview setting may lead the subjects to disclose information they might regret later (*ibid*).

When I made contact with my respondents, I got the impression that they found it interesting to participate in my subject. When conducting the interviews I tried to keep the consequences to a minimum, for example practically by letting the informants choose the time and place for the interview, and emotionally by anonymizing the informants. The ethical guidelines are created to define the informants' rights, and the researcher's responsibility towards the respondent. The principle of informed consent ensures the informants' control over their participation, the confidentiality make demands on how the researcher handles the given information. The principle of consequences means that the researcher has to make sure that the participants do not experience any adverse effects by taking part in the project (Thagaard, 2003).

4.3 Reliability, validity and generalisation

These concepts were originally connected with quantitative studies, and standardized and subtle measurements were developed. However, it has become increasingly important also to focus on the legitimacy of qualitative studies, but standardized measuring apparatuses are difficult to apply to qualitative analyses. The contents of the concepts are also somewhat different (Thagaard, 2003, Dalen, 2004). The following definitions are in accordance with Thagaard's descriptions of the concepts:

4.3.1 Reliability

Reliability says something about whether the research has been conducted in a confident manner. To ensure reliability, the researcher has to account for how the data are developed during the research process. This involves distinguishing between the information gathered during the fieldwork, and the researcher's own evaluation of this information. The difference between field data, for instance reports from interview conversations, and the researcher's own comments and assessments, have to be stated clearly. Tape recordings of interview conversations are a more trustworthy source of independent data than purely written field notes, where the interviewer has to reconstruct statements and citations. Reliability is also based on the researcher's account of his or her relations to the informants, and how this could influence the information that is being given (Thagaard, 2003).

To ensure reliability in my study I used a tape recorder to see to it that I did not miss out on any valuable information put forward in the interviews. However, the interviews were conducted in Norwegian, and I had to be very careful when translating the citations into English, in order not to misinterpret or miss out on any specific lexical content. I have also given an account of my relationship with the informants, and how the fact that I knew them beforehand may have influenced the information they provided.

4.3.2 Validity

Validity is connected with an assessment of the quality of the interpretations. The researcher has to go through the basis of his or her own interpretations quite critically. It also implies that the results of the project could be verified by other research. This presupposes to give an

account for the methodology of the study and relations in the field. The researchers' positioning in relation to the surroundings in which he or she is studying, is of importance to the interpretations and the understandings that are developed during the research project. The basis of understanding is dependant on whether the researcher has a connection with the field of study or not. The notion of validity is especially relevant in affiliation with case studies, where the possibilities of verification could be incorporated in the research design (Thagaard, 2003). When interpreting the data, it is important that the researcher is critical to their own analyses. The strength of the outcome is enhanced by arguing that any alternative interpretation would be less relevant. If an interpretation should be verified by other research, then the researcher should give an account of how he or she came to those conclusions in which the projects result. This involves explaining the methods in which the study was conducted as well as the relations the researcher has to the informants (*ibid*).

I had limited experiences with the field of restructuring. Hence it was important to acquire an understanding of how the informants experienced their situation during the interviews. I have also given an account of how my study was conducted, and my relationship with the informants, in order to ensure the validity of the study.

4.3.3 Generalisation

Generalisation relates to the fact that the interpretations based on a single study could be relevant for other studies. The researcher has to argue that the conditions that contributes to the interpretation of data in one context, is also applicable in others. Generalisation involves that the theoretical understanding of one project are put in a broader context. The concept could also be seen in connection with the recognition from readers that are familiar with the subject. Generalisation is especially relevant in connection with case studies, where the possibilities to generalise are incorporated in the research design (Thagaard, 2003)

In my study, I would argue whether the experiences my informants had in connection with the restructuring project also could be applicable in other studies of employees' experiences with a restructuring project. The assumptions I make about the employees experiences could only be investigated by further research, and could initiate new research, for instance by comparing how the employees in other hospitals responded to restructuring.

4.4 Informants

The most important factor for me when choosing informants was that they had some experience with the restructuring project. The sample was collected as follows: During my internship, I took an interest in restructuring. When finishing the internship; I contacted the managers, informing them that I wanted to concentrate my master thesis around the restructuring process and how it affected the members. I got their consent in conducting the study. I stayed in touch with the ward and was later invited to attend a celebration of the restructuring project. I then approached five of the other attendees, presented my thesis, and asked if they wanted to be my informants. I received positive feedback. Sometimes later I sent an email, to inform them that participation is voluntary, and that all of the information they shared would be treated with confidentiality. I wanted them to know that participating was not compulsory, because I did not want them to feel obliged to take part in my study. I wanted to ensure that those who participated were interested in the subject, and to create a sense of commitment when they agreed to contribute. They reconfirmed their participation. I also added three additional informants to get a broader insight in how the hospital members experienced this situation. The total number of informants in my study is eight. All the informants are women, mainly because the ward where the restructuring project took place is dominated by women. This could have affected the outcome of the study. However, I find my informants' experiences and opinions just as valuable as any other employee in the hospital ward. Even though it would be interesting to get a man's perspective on the subject, the individual's experience is the most important in this study, and not gender specific. Due to the shortage of men in the department, I also found it wise not to include men of privacy reasons, since they could be more easily recognized. The ward is situated in two different locations and it was important to include informants from both, to secure the totality of the study. One location has more employees than the other, and informants are included proportionate to this. There are two main occupational groups employed at the ward, namely technicians and doctors. The former profession is significantly larger than the latter, and hence, the proportion of informants is larger, six versus two respectively. The age of the informants range from 43 to 63 years, and they have been employed at the ward in a timeframe of 1, 5 to 32 years. To secure the informants anonymity, I have chosen to replace the informants name with pseudonyms. I have chosen to give a presentation of each informant in the shape of a short summary of their interview as a basis for the analysis:

Ragnhild: Genuinely positive to the restructuring. Enjoyed to participate, although with some stages of discouragement, especially concerning the negativity of others. She invested a lot of effort into the project.

Frida: Saw the restructuring project as being imposed on them from the management. Her initial reactions were negative, but found it somewhat interesting to participate. However, she found it time-consuming and wanted time dedicated to working with the project.

Halldis: Experienced the restructuring project as something very positive, but suspected some hidden agenda during the project. Tried to motivate colleagues, and invested a lot of time and effort in the project.

Inger: Found the project exhausting, a lot of work to be done in a short period of time. Was initially positive, but became more negative as the process went along. Sometimes felt that she had too much work to do.

Eva: Experienced the work load in the project to be massive, and not in conjunction with the actual results. Found the mandate and the purpose of the project to be a bit unclear, but participated as well as she felt she could.

Gro: Was initially very negative, and her attitudes have not changed during the course of the project. Thought the process went on too fast, and did not find the concrete results to correspond with the amount of work put down.

Margrethe: Was negative to the project, and felt very dispirited at times. Did still try to encourage her fellow co-workers, and put a lot of work and effort into the project.

Berit: Was very positive. She regarded the project as very enhancing for the ward, and as a tool to realise common goals. She tried to bring her colleagues to the same understanding.

4.5 Interview and interview guide

An interview is an exchange of viewpoints (Dalen, 2004). The purpose of a qualitative interview is to obtain thorough and descriptive information of how individuals experience different aspects of their situation and to get insight into their own experiences thoughts and feelings (*ibid*). The researcher is the instrument, and is responsible of collecting,

understanding and interpreting the answers that result from the interview (Dalland, 2000). An over-arching goal for any research interview situation is to create a confident atmosphere, in which the interview could take place. However, there is an asymmetry in the situation. The informant is alone in being confidential and open. The researcher's purpose is merely to collect data, and the relation between researcher and informant is influenced by the fact that the researcher controls the conversation in order to get information about the study's subject. However, the researcher is also dependant on the informant to be willing to share his or her experiences and points of view, and hence is in control of what to express during the conversation. Both parties have influence on how the interview elapses (Thagaard, 2003).

I have chosen to use a semi-structured interview guide. The topics the researcher wants to investigate are laid down in principal, but the succession is determined along the way. The researcher follows the informants' story, but is still able to ensure that the intended topics and questions are answered. It is also important that the researcher allows the informant to bring up topics that the researcher was not aware of upfront (Thagaard, 2003). The interview guide determines the succession of the topic the researcher wants to investigate. In addition to the questions put on paper, the researcher should encourage the informant to elaborate by giving positive feedback such as nodding and asking follow-up questions (*ibid*).

I divided my interview guide into four parts, in relation to Scott and Jaffe's change curve. This was done in order to investigate the informants' experiences with the restructuring project and discovering their reaction pattern. I included both open ended questions where I asked the informant to speak freely, and more fixed questions to get specific answers. I also urged the informant to elaborate on certain subjects where I found that to be natural. The interview guide was not followed point by point; I made allowances for slight changes as the interview progressed, if that was more appropriate for the conversation. Before I started interviewing, I conducted a pilot interview with an acquaintance of mine. In retrospect, to get a proper test I should probably have conducted a pilot interview with somebody who met the criteria for the study, but the shortage of time did not allow for it.

4.6 Conducting the interviews and data collection

I wanted to create a safe environment around the interviews. I was concerned with letting the informants choose time and place. However, they seemed hesitant to decide, so I presented a few dates, and we agreed on a time. The use of tape recorder required the interview to take place somewhere quiet. I explained that I had a room at my disposal, but allowed them to choose where it was most appropriate for them to conduct the interview. Hence, all of the interviews were conducted in offices at the ward during work hours. This could provide a starting point in creating a safe and stable environment for the informants, as they were familiar with the surroundings. However, I have certain doubts about conducting interviews at the informant's work place, in case it could have made them less open in their answers. The interviews were conducted at times with full activity in the ward, and a couple of interviews were interrupted by other members of the ward by collecting something in the office, wanting to speak with the informant et cetera. This was normally not a problem, but it is not favourable, because it makes the informant lose focus and could lead to a more fragmented interview. However, they got back on track and we finished the interview. It would probably have been wiser to conduct the interviews after hours to remove these disturbances, but in this case it seemed as though the informants preferred not to be interviewed during their spare time.

The interviews lasted approximately 45 minutes. They were usually initiated with some small talk, since we already knew each other briefly. I brought up the letter of information, to ensure that they had understood it, and got their signature on the "declaration of consent". I organized the tape recorder while talking, because I knew that it could have an intimidating effect, and I wanted to make it to a natural part of the interview. Nevertheless, they seemed comfortable with it. I started the interview by letting the informants' tell me about their experiences with the project, and we went on from there. In certain cases, the informants were very eloquent, and spoke freely about the subjects, before I was able to address the question, while others needed more direct questions in order to talk. I adjusted the interview guide according to each informant, but made sure that I got responses on the topics I considered to be of the greatest interest. I also made arrangements with my informants to contact them if I needed any additional information.

4.7 Transcription

Transcribing the interviews from an oral to a written mode converts the interview conversations into a form more applicable for analysis (Kvale, 1996). There is no standard form or code of transcribing interview material, but there are some choices to make. This includes how the statements should be transcribed, verbatim and word by word, or in a more formal manner, if the entire interview should be transcribed or whether the transcribers should condense and summarize the parts that consist of less important information, and finally if the researcher should include non-verbal expressions such as laughter, sighing or gestures. There are no correct answers; it depends on the intention of the transcript, but it is important to state explicitly how the transcriptions were made (*ibid*).

As expected, transcribing the interviews was time consuming. The audio files were however of good quality and for the most part, all the informants spoke clearly and crisply, which simplified transcription. I chose to transcribe the entire interviews, word by word, to reduce the possibility of losing valuable information. The interviews were first transcribed into Norwegian *bokmål*. Since I was to translate the citations needed to substantiate my findings into English, I would not miss out on any information by excluding dialects. I excluded non-verbal sounds, such as interjections like *erm* and *um*, to included laughter, as it was often used to express emotions and intensify their assertions, such as resignation or relief.

4.8 Sources of error

4.8.1 My role as a researcher

Putting on the role as a researcher is a different approach for me to acquire knowledge. It is also a different angle for me to encounter other people. People's perception of a researcher is a person with authority and great insight, and is often regarded as an expert. I knew my informants upfront, and doubt that they considered me very differently as a researcher, than before. Nevertheless, I wanted a professional atmosphere around the interview. I wanted to let the interview take form as a conversation, with the informant as the active part. I wanted them to share their experiences, and not be influenced by my theoretical knowledge of restructuring. During the interviews, I sometimes experienced that the informants wanted to

make sure that they had given the “right” answer. I tried to assure them that there were no correct answers and that I was looking for their personal opinions and experiences, but responses like “was this what you wanted” and insecurities like “I don’t know if this is correct” still occurred, and some of them seemed to want my confirmation. I tried to explain that I did not have any answers; and that it was the informant’s opinions in each case that was the right answer. Here I see the power a researcher holds, the informant wants to be clever, and give answers in accordance with what she thinks the researcher want.

4.8.2 Relationship with the informants

I got to know my informants when I spent my internship at their ward. On the positive side, it increased my access to the field I wanted to study. It did not arise any difficulties in getting informants; all of the informants I approached wanted to participate. However, I wanted the informants to attend voluntarily, and even though I stressed this to the informants, in some cases I got the impression that they didn’t want to refuse. Some of them even put it like they stood in some kind of debt of gratitude towards me, since I had helped them out during the internship. Still, I didn’t feel that they had any objections against participating. I made a point of showing my gratitude to all the informants, and ensured them that they should not feel obliged to participate. By being familiar with the informants, it could be easier to create an atmosphere for talking about confidential subjects. On the contrary, it could also be easier for the informants to talk to a complete stranger whom they probably not would meet again. However, I did not perceive that their knowledge of me was an obstacle to talk about their personal experiences, and the environment in the interview was good.

4.8.3 Linguistics

The informants in my study were employed at a Norwegian hospital. Hence, the interviews had to be conducted, and transcribed in Norwegian. I wanted to make the informants’ statements and quotations as the largest part of the analysis. Hence; I had to translate the quotations into English. Even though I tried to translate the quotations as carefully as possible, and preserve the intended meaning behind the statements, it is possible that something could have been lost in translation.

5. Analysis and discussion

The interviews with my eight informants form the basis of the analysis and the discussion in the study. There could be several ways to interpret the data, and I want to emphasize that this is solely my interpretation, which is neither more correct nor more wrong than any other way to interpret the data. I have chosen to use specific statements and citations from my informants, and interpret these in connection with theory on the subject. The informants are evident throughout the presentation. My theoretical framework is based on Scott and Jaffe's change curve, and this also makes the basis of the analysis. I have chosen to divide the chapter into four main sections, in correspondence with the four stages of the curve.

5.1 Denial

Denial is seen as the first response when a change is proclaimed, and often manifests itself in the form of numbness or indifference (Scott and Jaffe, 1989, chap. 3). The employees seem to disown the change, and I should expect to recognize withdrawal and lack of enthusiasm.

5.1.1 Initial reaction to the restructuring project

From the outset, it is common to reject the fact that a change is happening (Grønhaug et al, 2001, chap. 14). I asked my informants how their initial reactions to the restructuring project were like, and the responses varied a lot. Some, like Ragnhild, were positive:

Yes, then I thought: "That sounds good!" I was absolutely positive (Ragnhild).

She seems very enthusiastic about the project, and is supported by Halldis:

My initial reaction was that it was an opportunity to...to bring forth what I find important (...) (Halldis)

Halldis starts to see opportunities already at the start of the process, and is clearly not in denial. She seems rather to be in the exploration stage, which is not typical as an initial reaction to a restructuring project. Margrethe is, on the other hand, of another opinion:

Oh dear! (Laughs) "Do we have to?" (...) Yes, I thought, "oh no, do we have to, how should this pass on, what happens now," you know (...) (Margrethe)

She has also moved swiftly past the denial stage to the resistance stage, with emotions such as despair, anger and insecurity. The informants do not seem to have spent any time in particular in the denial stage, at least not in retrospect.

5.1.2 Information

Information and communication are two of the main strategies in order to implement successful change, especially during the early stages of the transition, where the employees do not fathom or resist the notion of change (Grønhaug et al, 2001, chap. 14). Information is also a legal rule as stated in Hovedavtalen §9-2, which states that the employee representative should have genuine influence when it comes to the mandate and the composition of work – and steering groups, and instructs the organization to discuss alterations of any importance with the employee representative at an early stage (Granden, 2002). However, to guide the organization through the change process as smoothly as possible it is important to inform the entire work population. It is necessary to use the time needed to give as good and thorough information as possible (Grønhaug et al, 2001, chap. 14). During times of change, an overall objective is to keep everyone informed. The information has different purposes, as you move through the stages of the change process. The main purposes of informing employees through a meeting are to announce the change, to provide new information and clarification and to give people the right environment to express their feelings. It is also important to involve the employees in the planning and implementation of the change, together with providing feedback on how things are going (Scott and Jaffe, 1989, chap. 4). I asked my informants how they considered the information they had been given, and Ragnhild replies:

Well, we didn't have much information (...) I believe that not giving us information was somewhat meditated. That there was something about laying down some kinds of ideas and rough guidance, and that we were...in a way should bring it forward ourselves. (Ragnhild)

Ragnhild here finds the retention of information to be deliberate, and aimed at forcing the employees to explore the project themselves. This is according to Ahrenfelt (2001), creativity or massive change cannot be ordered or imposed on somebody. The managers should instead rather direct the situation, so the employees start to see something else, rather than their usual situation, and the need for change. The difference between directing and ordering is that those being directed participate more actively and use their qualifications,

while those being ordered are obedient to their manager, but more passively and less creative (Ahrenfelt, 2001, chap.10). However, Ragnhild is not dissatisfied with the information, and says further:

But, I think that we got sort of reasonable feedback on what we were wondering on, roughly speaking. (Ragnhild)

She says here that even though they did not get very much information as an incentive to make them start to think themselves, she is content with the response they were given if they had any questions. A manager does not have all the answers up front, especially not in times of change. But by encouraging the employees to ask questions, and hence try to find the missing answers, the manager appears as credible and trustworthy (Scott and Jaffe, 1989, chap. 4). My informants are not unanimous on the topic of information. As Eva puts it:

We didn't even understand the mandate! So we had to rephrase it (...) (Eva)

She has evidently not apprehended the information as crisp and clear. Giving good information that people are capable of understanding and use constructively, is a difficult task, and demands the ability to adjust the information to the target group, as they move along the change process (Grønhaug et al, 2001, chap. 14). The information that Eva received, was not adjusted to the stage she was in. It is not only the information itself that is important; the way it is presented does also matter. It is often necessary to use different forms of communication, such as meetings, email, informal discussions, newsletters to name but a few. When a change is announced, a meeting with the entire ward could be appropriate. An email or a newsletter would not do the trick here, as written announcements do not allow people to express their feelings to those initiating the change. Written documents are often used to avoid dealing directly with people and their responses, and would be counter-productive (Scott & Jaffe, 1989, chap. 4). Margrethe speaks of the way they were informed:

I'm not that fond of mail, personally (laughs.) I like to get the information orally, where you could pose questions more directly (...) (Margrethe)

According to Margrethe's wishes, the information should be addressed directly to the employees, in the form of meetings, and not in writing. Written statements could still be wise, as a follow-up after a meeting, as a reminder. People in denial could have a hard time "hearing and digesting" the information, and could be in need of repetitive information (Scott and Jaffe, 1989, chap 4). However, in a busy work day, it is difficult to gather everybody to attend a meeting, and somebody could lose out on important information:

So that is a weakness, that not everybody is present at meetings, and that they don't apprehend that they've got an email, either. (Inger)

It is also seen as a duty to be responsible for the acquirement of information themselves:

You have the need, as an employee, to feel the responsibility to seek... gather information yourself, as well, to talk to your colleagues (...) (Berit)

Giving out information should have high priority throughout the entire project, not only at the start. Several meetings may be necessary, and should be arranged anytime there is something of great importance to report. As the information becomes available, it should be shared with the employees (Scott and Jaffe, 1989, chap 4). Frida says the following:

Well, upfront I thought it was good, but it has been a bit...a bit sporadic during the course, in a way (Frida)

The informants' experiences of the information are varied, but my overall impression is that they found the information to be fine, and if otherwise, they would get responses if they asked for it. They prefer to receive the information in plenary, as meetings, as it allows room for discussion and participation. The downside to this is that it is not possible for everybody to attend meetings which are held during the work day. This creates a gap between those who are informed, and those who are not. It is easier to feel a sense of belonging to the project when you are part of the entire process, and this is not as easily created simply by reading. A solution could be to move the general meetings to a time where everybody is able to attend. The ward is out-patient and this could be solved by holding the meeting after hours, or shut down the clinic a few hours earlier, to keep the meeting in between regular hours.

5.1.3 Analysis of the denial stage

The denial phase is diagnosed by withdrawal, ignorance, "business as usual" and the attention is on the status quo (Scott and Jaffe, 1989, chap. 3). My informants did initially show any signs of withdrawal and not understanding their reality, and hence, did not show any specific signs of denial, and by so doing, are not typical for a "normal" reaction to change according to Scott and Jaffe. But when asking about experiences with the restructuring process as a whole, Margrethe says the following:

Purposively, I have pushed away certain things, I just can't seem to deal with everything, and just thought "okay, that's it, turn away" (...) I have tried to participate, and do what I could to make this...that we should be able to pull it off. But... at the same time I've also tried to suppress a lot, I think. (Margrethe)

She shows clear signs of denial, by pushing away the reality, and not wanting to deal with the situation. This is normal when going through a major change process. It is most common to transit through the stage of denial early in the process, it is however not unlikely to shift back and forth between the stages, and have relapses into an early stage (Scott and Jaffe, 1989, chap. 3). Although not the norm, it is possible to move through the different stages in another way than the consecutive order, as Margrethe has done. This is the only clear sign of denial I find among my informants. However, Berit has done some reading about organizational theory, and speaks of the reactions of her co-workers employed at the opposite location:

You can't put aside the fact that those at [the other location] has been in a very belated stage in that process, because they are still in the denial stage (...) (Berit)

She recognizes denial among her colleagues, and claims that they are at another stage in their transit, although they have not realised it by themselves. This is probably what denial is all about; they repress their own reactions to the project. Committing to work groups and conducting the work as normal could also be a sign of denial, in which they protect themselves from the realities behind several mechanisms of defence. Some informants could therefore be more in denial than they appeared.

5.2 Resistance

Resistance is the stage where the negative feelings towards the project usually manifests, and provoke reactions such as anguish, anger, depression, fear or uncertainty due to the change (Scott& Jaffe, 1989, chap. 3). When asking my informants about resistance, their expected experiences should be anger, blame and depression.

5.2.1 Own resistance

People undergoing change move through a period of transition. Unless there is transition, there cannot be change. Even if the changes are required, and to the better, the transition

starts with having to let go of something and there are losses connected with this (Bridges, 1991, chap. 3). This can lead to a feeling of resistance towards the change:

It is a project we are somewhat imposed to do, somehow we have no choice (...) at the starting point, you are somewhat...take a deep breath and are negative. (Frida)

Frida feels here that the restructuring project was put on them by force, and is putting forward negative attitudes to the project. She says further:

(...) what you also think are" would it result in anything?" You say, what would be the results of it. A kind of mentality you make up (Frida)

Frida here doubts that the project will lead to anything, and seems dispirited to the entire process. This is a common reaction to a restructuring process, and a form of resistance. There is a downing of tools, and a sense of disbelief amongst the employees, that the process will not result in anything, so there is no use in it (Scott and Jaffe, 1989, chap. 3). This is in connection with expectancy theory, meaning that people create subjective presumptions about the effects of a particular change. If their subjective probability is high towards that the change would be unfavourable, they are likely to resist the change (DuBrin, 1992, chap. 16). Frida does not consider the change to be beneficial, she does not assume that it would actually have any positive outcomes, and is thereby resisting the change. Gro is also negative to the process, and her anxiety is due to a fear of her ward being closed down:

Yes, immediately I thought that this was the death blow, to put it that way. Now are we...they are going to shut us down (Gro)

Gro fears that they are going to bring down her section, and is therefore very indignant. If the restructuring project led to a disruption of the ward, then it would be a terrible loss for Gro, and her fellow employees. Hence, she is negative and very reluctant to the process. This leads her to considering leaving her job:

In between, I've thought..." if it gets too bad, I'll switch jobs". I've thought of that many times (Gro)

The project has had a great impact on her personally. She obviously thinks that the restructuring project will do her more harm than good, and is so negative to the project that she has considered getting another job. Her feelings are utterly negative throughout the process, and do not seem to have moved past the resistance stage.

5.2.2 Resistance among others

One of the questions the informants were asked was how they would describe their colleagues' attitudes towards the restructuring project. One thing that struck me there was that even though some of my employees didn't think of themselves as very negative towards the project, all of them considered their co-workers to be negative. Seeing others as more negative than themselves, could be a sign of denial, it is easier to project one's own resistance onto others. When asking about what signs of resistance, she has noticed among others, Ragnhild says the following:

Everything! Everything, quite simply. I mean, when you won't even...when you have a broken printer, and am told that you could buy a new one, and you won't even do that... Well, then I say that you have become completely reptile, and are just saying "no, no, no" (...) I think of it like this "how much resistance should you really... Here you have 2000 NOK to a printer, just buy it!" How much trouble could you make you of that? I felt almost as they were in the defiant age (Ragnhild).

Ragnhild finds the resistance among her colleagues to be somewhat childish and feigned, and that they are reluctant to everything, not matter what. Ahrenfelt (2001) assert three different phases of resistance. This could be seen as an example of Ahrenfelt's initial phase of resistance: The characteristics of this phase are that it is verbal, weak and lacks creativity. The employees are sceptical and the expressions do not seem to have been thoroughly thought through; the response to something new is negative, even if they do not know what its objects are. This is an emotional response to something that differs from the usual way of doing something, and the reactions such as scepticism fear and anger is a cognitive instinct of survival (Ahrenfelt, 2001, chap. 13). Ragnhild reacted to the resistance among her colleagues with resignation and frustration. The opposition among her co-workers influenced Ragnhild in a negative way; she was annoyed with their lack of positivism. Inger did also experience a lot of resistance to the project among her colleagues. She felt that they were negative to the workload imposed on them because of others' participation in the project:

Everybody was frustrated that all the others had to go to meetings all the time, I think. And... Well, there weren't any people left to do the work. And that is frustrating. (Inger)

The excess work that was put on the other employees because those involved in the work groups had plenty to do with the project, created a lot of tension. The clinical activity should not be reduced during the restructuring project, and hence the workload increased for those

not directly involved in any work groups. In a transition period, excess work is not uncommon. People might have to do additional tasks, as well as learning to do new routines. This could result in resistance to the restructuring (Høst, 2005, chap. 7). Berit has a more nuanced image of the reactions of her colleagues:

(...) You get the whole scale. Someone would, to start with, not see the point in being imposed a lot of excess work, and... "what will this lead to, then?" A lot of extra work beside the daily routine (...) While others, they are more ready to get down to the task without any remarks, they visualise the task, and what it implies, and start to think constructive: "How should we solve this" and... (Berit)

Here she discovers some of her colleagues to be resisting the project, with negative attitudes and lack of faith in the projects' outcome, and could be placed in the resistance stage. While others have passed through that stage and moved on, and is noticing the possibilities behind the project. During change, the employees will probably be at different stages, or even swinging between stages (Scott & Jaffe, 1989, chap. 3). Even though the impressions of how the colleagues reacted varied, all of the informants discovered, in one way or another, some negativity among their colleagues. The ability to change is considered as a positive trait. It is hard to admit to be resisting change, as it is an important factor of organizational life:

You have to be willing to change! (Frida)

Willingness to change is thereby considered a positive trait. The negativity and resistance among the colleagues frustrated my informants. Negativity affects the surroundings, and should be defeated. It is however important to acknowledge that resistance is a natural response to change, and should be accepted for what it is, and rather help the employees overcome it rather than suppress it (Scott & Jaffe, 1989, chap. 5).

5.2.3 Change of attitude

In a transition period, the employees move through different stages of reactions. After the change has started to sink in amongst the employees, they start to get used to the alterations. In this period, they could start to see that the change will lead to new opportunities (Scott and Jaffe, 1989, chap. 3). The change starts to seem less intimidating and an initiative to participate and search for solutions could emerge. Frida says the following when asked about how her attitudes changed during the course of the restructuring project:

Well, it is...after all, it is a bit exciting to go through the routines we have and be able to look at ways to improve, and get to know....you get to know each other in a better way; you get some feedback on how those at the other location are feeling, and there is lots of positives...not only working with that project, but it gets sort of spin-off effects, I think (Frida)

Frida here sees several positive outcomes of working with the project. She sees the positive consequences of going through the lines of action at the department and exploring new ways to improve the conduct. This is in connection with the mandate of the project, and technically speaking the optimal outcome of a change project. However, the more psychological side effects are just as interesting and important. Frida sees the side effects of the project to be very valuable. She gets to know the people working at the other location in a whole other way than she used to. The distance that used to be between the two locations is diminishing on the account of closeness. The main task to the ward is to offer the best treatment possible to its patients. Conflicting interests between the two locations the ward is situated could complicate this task. Enhanced collaboration between the wards could reduce the differences, and make them able to offer better treatment to patients. Margrethe has also had a change of attitudes in the project. Her reactions have however shifted back and forth along the entire curve. She has been mainly sceptical to the project, but still says this:

But the project itself, I mean the attitude to do such a job...I feel, in a sense, that it was ok. When we got started, and...it wasn't anything...Anyhow, I didn't feel that, that it...I didn't think, sort of "ugh" all the way, you know (laughs) (Margrethe)

Here Margrethe seems to reassure me that she was not negative all the time, just as she tried to encourage her colleagues to do their best in the project. My initial interpretation of Margrethe is that even though she was very negative, anxious and feared the effects the project would have on them, she tried to do her best despite her feelings. Margrethe seem to deal with her frustrations by calming and motivating others. By suppressing her emotions and not allowing herself to have these negative views, she will be constantly shifting between the different stages in the curve, and it is harder to get passed the resistance stage. The normal response when going through a change is to move through the individual stages in consecutive order; to finish each stage before entering the next. But a transition period could also be experienced differently. Inger has this response to the change of attitudes:

I became more resigned after a while (laughs) Well, I found it to be...I think I was kind of positive to begin with, but then gradually, as the time went, and you didn't have the time to do anything... (...)It was frustrating with all the meetings that everybody had to attend, and...in addition to that the clinical activities should take its course, and you had to do your job, and...So you became gradually more resigned (Inger).

Inger's reactions are somewhat deviant from the norm. She considers herself positive to the restructuring project to begin with, but her attitudes towards the project seemed to become more negative as the project progressed. The motive behind her progressing resistance is the amount of work the project brought along in terms of meetings and work groups, and that there was not any time dedicated to working with the project. Her negativity is not directed towards the project itself, but the frustrations connected with the feeling of not being able to do the job properly. The hospital as such is a much institutionalised organization, and the opportunity to change these established routines along without interfering with the quality and quantity of treatment is demanding. The process in which the change is taking place is essential. This implies that the way the change is conducted, the time the change requires, and the persons involved with the change is just as important as the change itself (Bentsen, 2003). Inger is dissatisfied with the process here, and finds it strenuous because of how it is conducted and not because of *why* it is conducted.

5.2.4 Analysis of the resistance stage

Even though resistance is a predictable part of change, it is experienced as difficult, both for managers and employees. However, resistance implies that the change is being perceived, and is a more important step on the road to acknowledging the change than denial (Scott and Jaffe, 1989, chap. 5). Resistance manifests itself differently, and that was the case among my informants as well. The resistance and negativity range from lack of faith in the project and frustration over increased workload, to the fear that their location should be closed down. While a couple of my informants experienced the restructuring project to be utterly positive and a good way to enhance the relationship between the two locations and did not seem to spend any particular time in the resistance, a few other do not seem to have gotten passed this stage. There is no clear sabotage or open hostility among the most negative informants, and they still participated in work groups and attended meetings. Their resistance was a solitary path, because as Frida puts it:

Well... it doesn't do any good to be negative... (...) those thoughts strike us all, but how you present it in a way, and how you....go about and talk about it, is sort of two different things. (Frida)

Her opinions imply that everybody is entitled to be negative, but you should not express your negativity too much in front of others. Accepting and expressing resistance is necessary to overcome the resistance stage, and suppressing it would be unhealthy for the transition and may prolong or even sustain the resistance stage. However, all of my informants have recognized negativity among their colleagues. The response to this is mixed. Gro, who is negative to the project herself, understands the negativity:

I've actually understood that, because I've been there myself (Laughs) (Gro)

The attitudes my informants have towards the reactions of their colleagues are reflected by their own attitudes towards the project. It is easier to understand the negativity of others if your own reactions are equally negative. However, as the process progresses, there is usually a shift among the employees towards a more positive attitude towards the project, where they start to explore the possibilities and opportunities the change will bring (Scott and Jaffe, 1989, chap. 3). Some of my informants have a slightly different reaction pattern than that of Scott and Jaffe. They were positive at the point of departure, but their spirits dropped due to circumstances like increased workload and negative impact from colleagues, and they have an inverse transit through the change curve. However, their resistance was not universal, and mainly aimed at the process rather than the project itself, and hence easily transited. Others were negative for a long time, and did not seem to move past resistance:

I was certainly critical... healthy scepticism as I call it, for a long time. And that....I still has that (Gro)

Gro still lingers in the resistance stage and has not started to see the positive effects of the project. She seems to be in Ahrenfelt's second phase of resistance; she has realized that the change is happening, but are more insecure of the outcomes of the project, and is afraid that the organizational needs of her section of the ward will not be fulfilled (Ahrenfelt, 2001, chap. 13). A worst case scenario would be the closing down of that location of the ward, which has been considered among some of the informants as a possible hidden agenda during the project. With that in mind, a persistent distrust in the project seems natural, as this would have been recognized as a major loss. However, neither of them tried to sabotage or boycott the project in any way, but participated in work groups and acquired information. Even if there has been some resistance, and almost all my informants have had times of

negativity, the main focus has been positive. They choose to seize the opportunities the project will bring, and understand that the change is inevitable. With some exceptions, the severity of the resistance stage has been in the lower range of the scale. They have also transited through it quite easily. However, relapses to the resistance stage are not uncommon, and deviations from the principal directions of the change curve have occurred among my informants in terms of momentary experiences of negativity.

5.3 Exploration

The exploration stage occurs when the realities of the change are acknowledged, and the employees have started to adapt to the project and go through their emotions, they gradually start to look to the future and search for new opportunities (Grønhaug et al, 2001, chap. 14). Hence, I should expect to find energy and creativity among my informants when talking about exploration, but also chaos and over-preparation (Scott and Jaffe, 1989, chap, 3)

5.3.1 Management

The management is an important factor during change. They have to communicate the change, be present and honest, together with encouraging and involving the employees. (Nordhaug et al, 2007, chap 4). I wanted to investigate how the management succeeded with this project through the informants' eyes. Margrethe is negative:

I don't think it has been ok. Don't think that they have been so clever. It is probably due to that I haven't been very satisfied with then up front. And then...you should probably not expect them to handle such a situation any better (Margrethe)

Margrethe was dissatisfied with the management even before the change. Her resistance and grudge against the management encompasses all aspects with the management, and she acknowledges that her disbelief in them will influence her view on their performance in the project. Berit is more positive to the management, and recognizes a change in their conduct during the course:

They have also matured along with this process, and changed...perhaps not attitude, but clarifying their position or the openness concerning the matters, the different problems. And try to be including (Berit)

She sees an improvement among the management, and that they are trying to involve the employees in the process. A trait among successful leaders is that they are able to involve their employees in the restructuring project (Nordhaug et al, 2007, chap. 4). Frida, on the other hand, is more hesitant to assign any leadership traits to the management:

They have probably handled it the way they were told to handle it, I should say (Frida)

She thinks that her management have certain guidelines they follow in order to manage the change. Change management is a new skill, and not required only for the top management. If the project managers are constantly seeking the top managements' approval and waiting for them to explain how to change before any action is taken, the wait might be long (Scott & Jaffe, 1989, chap. 7).

5.3.2 Participation

The best documented way of overcoming resistance is allowing people to participate in the changes that will affect them (DuBrin, 1992, chap. 16). People will more easily accept the change when they are involved in the process, by having a role in defining how to meet different goals as well as how to respond to a new situation. Participation could take on different forms, and includes dedicated work groups, discussion forums, brainstorming meetings and suggestion systems. Those managing the project should try to involve the employees directly in the change process (Scott & Jaffe, 1989, chap. 6). The management in this restructuring project pursued participation from the employees and created work groups:

It was a subject on our department meeting (...) and then it was posed a question from our department manager, if there were anyone who wanted to participate. But he had also created some suggestions in advance, which I thought was a very good approach. So anyone could join the groups, if they wanted to participate. And that's what the way it was, all the time. So, I mean, you had every opportunity to get involved (Halldis)

Halldis says here that it was up to each and everyone to participate and get involved in the project, and that the management arranged for everyone to take part. She is satisfied in the way the arrangements were made. Allowing and encouraging participation from employees is an important method of managing change; giving your employees a significant part to play in the transition process facilitates the new beginning (Bridges, 1991, chap. 5). People get excited about the change when they see a part in it for themselves, and it is encouraging to

feel that they have a role in helping to define ways in which the team will be involved with the change (Scott & Jaffe, 1989, chap. 6). Halldis is a person who wants to get involved in things that happen in her work place, and is actively seeking out where to take part:

I guess I am of the quite active kind, who puts her head out (laughs) I think it is very important to be a part of things myself. It was....well that is both strength and a weakness, of course, so.... I found it extremely important to be a part of this, then. (Halldis)

Several informants find their participation interesting, and they like to play a part in the project. However, Ragnhild realises that her participation also has it downsides:

Maybe I could have been a bit more reserved at times (...) I still think that my enthusiasm was a bit too much for those over there [the other location](Ragnhild)

Ragnhild finds her eagerness to be a bit much for some of her co-workers, and that she perhaps should have calmed down at times. Having too much to do is a distinguishing feature of the exploration stage. Participation also has adverse effects. It is time consuming and could interfere with the other activities at the ward. Margrethe have this impression:

Personally, I feel that I had more than enough to do (...) there were times when I thought it was too much. But it wasn't only me! It was...it was the case for everyone. It wasn't any worse for me than it was for the others (...)It is always straining to be a part of these things, because it is detrimental to other things (Margrethe)

The time that Margrethe put down in the project was experienced as stressful, and it took a lot of time. The worst part was that it affected the other things she had to do. However, she emphasizes that it did not affect her more than it did the others. Change is interconnected with costs, and in times of altering the work alongside with new tasks, there might be lack of time, the productivity is reduced, and the tasks could be experienced as tougher (Grønhaug et al, 2001, chap. 14). The exploration stage is characterized by a lot of brainstorming on how to do things, together with learning through trial and error. People are creative and there is a lot of energy present, which could be regarded as exhausting (Scott and Jaffe, 1989, chap. 3). It is therefore not unlikely to experience some negativity during the exploration stage. However, the main opinions from my informants regarding participation are positive.

5.3.3 Co-determination

Participating in the project by attending meetings and work groups is not the only way the employees should be involved, they should also be given an active part in the decision

making. A good leader will give the employees the opportunities to take a part in making the change work in practice, by involving people in setting the directions of how the change best could be done (Scott & Jaffe, 1989, chap. 7). This project emphasized participation from employees when it came to attendance at meetings and in work groups, especially in the diagnostic phase, where the problem areas should be discovered. But when it comes to participation where the decision actually is being made, the experiences are divided:

No, I feel that that was definitely not the case (...) it was the steering committee that sat down and decided what should happen in the next phase and what should be the focus in the last phase. I might be wrong. But I am of that opinion that things were decided on a whole other level than we were at. (Margrethe)

Margrethe does not seem to be happy with the influence the employees had when it comes to making the actual decisions. She is supported by Frida:

No, we are not involved there. Because there are the steering committee or what's it's name, decision committee or...and we are not present there, have no access (...) There is sort of a main point that everybody should be involved and we are supposed to feel that we have a say in things and stuff like that. But when it comes to decision making, then we are not present, not even with our employee representative. So the impression that is left is that everybody should be involved, and everybody should have their say, but when all is said and done, it is not the fact. So you get somewhat fooled (laughs) a bit. Yes, I think so (Frida)

Frida feels that all the proclamations about employee participation are not applicable in practice, and that they are not as involved as they were promised to be. The notion of co-determination on issues that will affect the ward is important to my informants. It is therefore frustrating when they don't feel that they are being listened to, even though that was an important objective of the project. Frida even goes as far as saying that she feels that they have been tricked in a sense. They were promised that the employees would have influence through the entire process, and when they do not seem to be consulted in the deciding stage, the integrity of those behind the project are weakened. By not involving the employees in the decision making they are in a sense deprived of their possibilities to influence their work day. The exploration stage is the period in the transition that the employees make an extra effort in thinking of new ways of doing things. People tend to want to participate and get involved in things that will affect their workday. This involvement also means that they have moved past the resistance stage and is starting to discover the possibilities of the project. The team should therefore also be involved in making the decisions, as it helps them commit to the new ways, and also reinforces their belonging to the project (Scott & Jaffe, 1989, chap 6). Brainstorming and discussion in plenary is of great

value when it comes to involving the employees in the project, but the environment for discussion at the meetings was limited:

We had the impression of that when our top manager, when he spoke, then that was the end of the story (laughs). I sometimes then felt that the discussion were cut off, really. Of course, you could say, it is the management and they should also be taking the decisions, but sometimes I feel that the decisions were taken too quickly, there and then. And that they rather should have taken our experiences into consideration, and made the decision later on (Halldis)

The decisions were taken a bit too hasty, and not allowing any room for contributions from the team. Halldis' experiences are that when there were any disagreements in the meetings, the head of division used his position to finish the discussion. Just as important as creating a sense of liability to the project, is maintaining it. To bring about possibilities for participation is substantial in order to maintain and encourage the employees' commitment (Nordhaug et al, 2007, chap. 4). By alienating them from the decision making they could loose out on the support from their work force.

5.3.4 Influence and consequences

A restructuring project of some extent will also imply some consequences on the individual or the organization. The workload might increase, or the employee will be given new tasks and responsibilities. These consequences could lead to both gains and losses (Nordhaug et al, 2007, chap. 3). The main issue in this project was that the patients should not suffer any consequences. When asked about what influence the restructuring project had on the treatment of patients, the informants were unanimous, as represented by Halldis:

I think that it maybe it was the opposite, the clinic and the patients were put above all, and the restructuring project were affected (Halldis)

It was important to the managers behind the project and the informants as well, that the restructuring project should not interfere with the treatment of patients. As my informants say here, the project came in second on behalf of the patients. As health care workers, my informants are conscientious and thorough when conducting their tasks, and they would not let the project interfere with the treatment of patients. They did their utmost to prioritize the patients, and let the work with the restructuring project take place between and after clinical examinations. Hence, the restructuring project did not have any negative consequences for

the patients. On the other hand, working with the restructuring project could in turn lead to an improved care for the patient:

There are some routines we have altered. We have become aware of a couple of bottlenecks that we have done some thing about, which I think is better. Things get more swiftly done, we work faster. Or work faster... Well, er are aware of things you have to do in title to move the process forwars. And everybody have become aware of that (Inger)

By working in the project, the members at the ward have drawn their attention to some things that could be changed in order to enhance the treatment of patients and offer better services. But by facilitating the patient treatment, working with the project and other tasks during the restructuring project had to be rearranged correspondingly. This affected their work day:

During the restructuring project? There was a lot of overtime on the way. A lot of compensatory time off. Which I am not able to take (laughs). Yes, it is. I was not....I did not have any of my other tasks removed.... I had all my usual tasks even though I was involved in all of these groups. In the usual conduct of the ward. And it was overtime. And that...well, at the same time it felt...it felt as though it was only for a period of time, and then it is sort of ok. (Inger)

It is exhausting to be a part of the project, and it has certain side effects, like working long days and overtime. The increased work in itself is strenuous for my informants, but at the same time it is only considered to last a limited period of time. This makes it easier for the informants to commit to the project. For Ragnhild, there are also other factors that justify devoting time to the restructuring project:

Well those....attending those meetings all the time, implied that you had to relocate a lot of other tasks, and that was obviously quite a bit stressful. And that you had to do other people's tasks while they attended meetings. But I find that the motivation towards the restructuring project sort of compensates the fact that you had to work some longer days or somehow rearrange yourself (Ragnhild)

For Ragnhild, the project in itself was so motivating for her, that it outweighed the fact that she had to spend a lot of extra hours working with the project. She arrived early at the commitment stage, and was intrigued by how she could contribute to make the process better. The project was a good enough incentive on its own. But spending a lot of extra time on the project would also eventually affect the daily life of the informants. Inger put down a massive effort during the project, and this has had its consequences:

You mean my spare time? It became much shorter. I think that I've...I have gotten feedback from those at home that I'm stressed. And it is not over yet. But there are other tasks now, then. I have gotten feedback that I'm stressed, that I work too much and that I wake up during the night. That is not ok. It is not ok to wake up at 3 am in the morning. But it is improving. I guess that it is like that in some periods? (Inger)

She found it to be difficult to go through periods of stress and trouble sleeping during the restructuring project and her family is also thereby indirectly affected. However, she normalises her reactions to that it is common to have these experiences, and that it is on the rebound. The notion here is that the restructuring project has been difficult at times, but since they only perceived it to last a limited period, they managed through the process. This is a sign of commitment among the employees: They look past the problems and consequences because the mission of the project is far more important. Ragnhild sums it up:

I don't think that it had any tremendous effect on my personal life, other than that I had to ventilate some indignation and stuff like that when I came home (...) No, so I don't think that it had any influence, mainly positive because it was an interesting task. But you ventilate some frustrations. (Ragnhild)

5.3.5 Analysis of the exploration stage

After the realities of the change are acknowledged, the focus shifts from hostility and resistance to orientation towards the future. The hostility and resistance is overcome, and new opportunities are being investigated (Grønhaug et al, 2001, chap. 14). The management plays an important part in getting their team members forward in the project, and effective leadership could help the employees move through the curve (Scott & Jaffe, 1989, chap.3). Most of my informants did not have any strong opinions about the management. The management are considered as something vague and not very visible through the change. However, the employees are not very negative either. As Halldis and Inger says:

Well, they have perhaps not been so active (Halldis)

Well, they...I don't know, really (laughs) (Inger)

The lack of a strong management during change is evident here. This is a typical feature of change projects, the management somehow disappears, and they should have made a larger effort to be evident during the project (Nordhaug et al, 1007, chap 4). During exploration, in order to simplify the implementation and ensure successful accomplishment, it is important

to give people the possibility to participate (Bridges 1991, chap. 5). Most of my informants found the opportunities to participate to be good. The chances of getting involved were present to everybody, and also those not directly involved with the work groups were encouraged to contribute. The opinions are however more mixed when it comes to the amount of participation. Some of them found the participation to be exhausting:

I stood in several group, then. I thought I had a lot to do. Well...I thought I had too many tasks, perhaps (...) (Inger)

It became apparent during the interviews that the time required to work with the project was not compensated, but had to be conducted parallel to other tasks. This was experienced as exhausting and stressful for some informants; they felt that they were not able to do their job properly. However, they did participate to a great extent, and they seemed to have moved past the resistance stage and upwards in the change curve. Some of my informants that were involved in work groups also experienced a sense of irritation from their colleagues who got their workload increased, when they had to attend meetings and other task in accordance with the work groups;

But I think that perhaps those that weren't involved in any groups felt that it was sort of: "look at that, now they're off to their meetings again, and I have to do their job". I don't know if there were any conflicts, but sort of sulking in the corners (Ragnhild)

This shows the importance of being informed and involved in such projects. Those who are not involved, does not get the same sense of understanding and commitment to the project as the others. It is easier for them to reject the importance of the project, and react with anger when others have to attend meetings et cetera concerning the project. When it comes to taking part in the actual decision-making, my informants are negative. Their perception of codetermination in the project is low. They feel left out in deciding matters that will influence their ward, and that they are not listened to. To ensure a successful implementation of the change, the employees should be involved in deciding the cases. Joint decisions are not necessarily better than unilateral, made by the management, but the feeling of having their say is important for the employees (Bridges, 1991, chap. 5). There are some strong opinions among my informants on the matter. Ragnhild speaks on behalf of her colleagues:

I think that many felt that as an infringement that they weren't supposed to decide themselves (Ragnhild)

Even though a minority of my informants thought it was the managers' commission to make the ultimate decisions, they missed having influence on these decisions. A greater sense of belonging to the restructuring project as a whole is absent. According to Bridges (1991), everyone that plays a part is implicitly implicated in the outcome. By ensuring codetermination, people are involved in making the decision, and is thereby more presumable to abide by the results when taken into action. It is more important that there is accept for the solution in the organization, albeit not the ideal solution (Bridges, 1991, chap. 5). This ensures more obligations from the employees, which is important when they are on the verge of entering the commitment stage. Their attitudes towards and their experiences with the project is interconnected, and has a lot to say for their transit towards commitment. The consequences and the influences on their work- and personal life varied among my informants, but the notion of a lot of work and overtime is a recurring feature among most of my informants. As Inger says:

A lot of work! Really. It was a lot of work, and there were other things what wasn't done, which I lay behind with (...) (Inger)

This was considered stressful, and tiring, but because of the limited time frame and the dedication to the project, most of my informants accepted the extra workload. This implies that they are dedicated to the project. My employees, for the most part, seem to have gained an understanding of the project, and appear to have transited through the exploration stage according to Scott and Jaffe.

5.4 Commitment

The commitment stage implies that the employees are ready to commit to the plan, and are actively seeking out their new future (Scott & Jaffe, 1989, chap 3). My informants should rejoice the project and its opportunities, and be ready for the next challenge.

5.4.1 Collaboration

For a project to be successful it is important with a good environment for collaboration. How the employees cooperate, share information and ideas, help each other and the sensation of belonging together as a group is especially important in the health care sector, because of the interdependency of the tasks (Høst, 2005, chap. 7). Because of the separation of the ward,

collaboration across the locations was a distinctive feature in this project. Berit recognizes the importance of this:

*But, because of us being **one** department, then it is crucial that we work together with the daily tasks. And that we get more in harmony with each other, and get to know each other better, rather than only bringing up the negative and different sides of the others (Berit).*

She acknowledges the significance of the ward operating as one unit. This is not only important because it makes them get to know their colleagues better, but also in order to ensure the best possible treatment to patients. A harmonious department will make the collaboration better and thus create a more positive atmosphere. The intention of composing the work groups with members from both locations was good, but it could be difficult to make it work in practice:

The fact that we were in these groups made it obvious for all sides that we are sort of very....have somewhat different basis (...). Yes, but apart from all the “we against you” conflicts, I thought it was very good, really. And even though they, if some of them probably thinks of me as a hag, and they probably used to think, we have known each other for several years, that I was an alright girl, and now they probably think that I am a hag, and that they now bear a grudge against me.(Ragnhild)

Ragnhild sees that the differences become more apparent when they are working tightly together in groups, and that the cooperation could drive them further apart. She recognises the duality that concerns the ward, and that they might have changed their opinions towards her after working in the project. Ragnhild thinks of herself as being very enthusiastic about the project, and finds her eagerness to somewhat annoy her co-workers. She is also concerned that their views on her have been altered. Nevertheless, she is positive to collaboration across the locations, and thinks of it to be enhancing the ward:

After all, I feel that it has brought us closer together, I think so. And that is one of the reasons why I wanted to take some shifts there when they needed help. I thought that knowing a bit about how they are feeling; to participate on their terms would be very informative. To create a better solidarity among us (Ragnhild).

Working with each other has created a better environment for cooperation, and reduced the obstacles towards job rotation, in Ragnhild's opinion. During the exploration stage, new relationships between colleagues are sought and developed, and collegial bonds are tied (Grønhaug et al, 2001, chap. 14). Eva is also satisfied with the cooperation:

In our group it went very well. I think so. Great people and good cooperation. And we help each other out; you do that more often now that you understand each other. Get more sympathy for each other when we are in groups together. I think that has been positive. You get fond of people, and you know where the shoe pinches (Eva)

Although there were some differences, the cooperation in the groups went well, even though they were compounded of employees from both locations. By working together as one unit, that is trying to reach common goals, a new appreciation of each other is created. This could also improve the patient treatment; because closeness between the employees could make it easier to help each other out across the locations if that is needed.

5.4.2 Learning and improvements

A change project is a process of learning. The project could imply that the present ways of conducting tasks are strengthened or improved, or there could be developed new ways. Learning could also imply that the employees start to see themselves more as a part of the totality. This includes that each employee realises that he or she is a part of both problems and solutions in the organization (Høst, 2005, chap. 7). The goals of this restructuring project were to reform work processes in order to reduce waiting lists and improve their services. A more underlying mission was to create a sense of community among the employees across the locations. According to Berit, the learning outcomes were extensive:

We have a lot of similar tasks, and we wanted to strengthen that.....with this restructuring process, strengthen the notion of community, work towards a better, mutual organization, and gather our strengths, and work together with our important tasks, our profession, and (...)(Berit)

Acknowledging the importance and the focus on improving the cooperation is an important measure towards commitment to the project. Even though there has formerly been some distance between the locations, this is now diminishing. Berit realises the importance of cooperating to ensure the accomplishment of their “important tasks”, namely the treatment of patients. Eva says this about learning and solutions:

You know, that's what's funny. To find that goal. Eventually. To reach the goal. And....respect to others, listening to each other and...Raise each other's consciousness. Verbalize it. Verbalize how you maintain the quality in a work place. I find that important (Eva).

She is concerned with the quality of their services, and sees that the opportunities to this have increased because of improved cooperation that resulted from the project. It is evident

that the informants are mainly concerned with two things when it comes to the positive outcomes of the project, namely creating a better understanding between the colleagues and ensure the quality of their treatment of patients. However, also other issues emerged from the project. How personal attributes affect participation in the project is something Halldis experienced in the project:

I think I have learnt that not everything comes out in the open. That I might think that things come out, because I am that kind of person myself. And since I would bring things up if I disagree, then I think that everybody else also does that, that they are the same kind as me. But that is not the case. So I think I've learnt that I have to ask people more, or say "I know that there might be some disagreements here, did you ask about that, did you ask about that" Have to dig deeper, to get the cards out on the table (...) Even if you are outspoken yourself, others could be silent. And that that is a danger, is something I've learnt (Halldis),

Halldis is very committed as a person, and saw the restructuring project as an opportunity to draw attention to some issues as a person. She is very concerned about bringing up all the issues of importance, but realised that her colleagues might not have the same outspokenness. She has experienced that not everybody dares to speak their mind, and she has become more concerned with ensuring that her co-workers get involved if there is something they disagree with. She has clearly committed to the project, and is trying her best to help her colleagues do the same.

5.4.3 Degree of success

There are a lot of possible outcomes of an alteration process. All changes start with an idea and an intent. The outcome is then compared with the intentions, and the degree of success depends on how well these measures are achieved (Jacobsen, 2004, chap 1). This restructuring project aimed at becoming more efficient in terms of bettering the wards' processes so that their services could be improved and the waiting list reduced. The underlying goal was to create a better interdependence between the two locations of the ward. The main feature in the responses of my informants is that they have not seen the greatest outcomes yet. Gro experiences a feeling of indifference:

I can't say that it has been successful. But then...Or, I can't say that it has been unsuccessful. But, for my part and things like that, for my part, then I don't know if I've had that many benefits (Gro)

The project in Gro's opinion has not brought along the largest alterations. She does not consider the project to give her many benefits. Her attitudes towards the restructuring project have been negative from the beginning, and she has not changed her course. Hence, it would be unlikely for her to abruptly start to recognize the positive outcomes. However, she acknowledged that even though she did not find the project useful, her colleagues might:

What I've concluded, is that we didn't need a whole project to find out all of these things, but perhaps somebody needed it. And I think I got the impression of that along the way, that someone thought it was very good. And I respect that a lot. That it is the way it should be done for a lot of people (Gro)

Gro has matured during the process. She understands that there are people that needed and wanted the restructuring project, and that benefited from it, even though she did not do it herself. She is still resisting the project as such, but has started to see that it is necessary for others beside her. That could be regarded as a significant move towards the right of the change curve. Inger, on the other hand, was initially positive to the restructuring project, but is somewhat disappointed with the outcomes of the project:

Yes, really, I think.... It hasn't resulted is as much as we thought it would, perhaps. It hasn't, not really. (Inger)

Inger was hoping to see more concrete results from the project. She thought the project would result in more that it did, regarding all the effort that was done previously. She adds:

I feel perhaps that it was a lot of work that didn't...which I'm uncertain of how much results that came out of it. We were engaged in a lot of stuff, and we charted everything, and I am a bit uncertain, I guess, of what that has been used to in retrospect. Well, it doesn't feel futile, I guess. Because you put a lot down on paper that you....it were ok to...it was like we thought it was, but it was very ok to put it down on paper and...To get the feeling that your perceptions about your work day are correct. But how much advantages that emerged from that, I am not sure of. They are still working with it, that steering committee. They are working with it (Inger)

The results that emerged from the project do not fit in accordance with all the effort that was being put down in the earlier stages of the project. The concrete results fail to appear. Nevertheless, it does not feel like a waste of time in Inger's opinion. It was good to confirm their assumptions about their work day. But that in itself did not bring along any tangible results. She knows that the steering committee is still working on the project, but she is somewhat impatient and wants to see concrete outcomes. A common mistake in restructuring projects is to rush the process. Alterations of a certain extent take time to accomplish. It is important to make all the employees pass through their resistance before

the major changes is taken into action (Ahrenfelt, 2001, chap 13). Inger has come far in her transition through the change curve, further than some of her colleagues. For the management, it is important to ensure that all the employees progress through denial and resistance before demanding performance and massive change (Scott & Jaffe, 1989, chap 3). Ragnhild recognizes the importance of this, and believes that she has been too impatient when speaking about the success of the project:

Well, speaking out of the results I would say so-so. But I think perhaps that bringing something to a successful close that fast...I think that maybe I am too impatient with the printer and everything. "Yes, if we have a problem let's just solve it right now" But I think perhaps that restructuring...that it deals with what's going on inside of people's heads. That I was too concerned with solving the actual problems
(Ragnhild)

Ragnhild has reached an important understanding during the process. She acknowledged the fact that such a process extends beyond just solving concrete problems, and that it also is important to understand the human aspect of the project. She continues:

I think perhaps we should have used the time to get more coordinated, in our minds (...). This was very strange to realize. It is really more in the aftermath of the project I've thought of this. I felt that sort of the tasks were very specific, by looking at things in the work day that were waste and frustrations. To get rid of the obstacles, in a sense. I thought of it as a very concrete task, to solve specific problems. I think perhaps that we should have tried to become more in agreement with each other
(Ragnhild)

5.4.4 Attitudes towards a new project

A truism of today is that the only constant is change. Non stop organizational change is become the routine for many organizations (Bridges, 1991, chap 6). Change is also a main condition in the hospital sector, and this is presumably the case in the foreseeable future as well (Borum, 2003). The employees working in a hospital must hence be prepared for sudden changes and alteration projects as a part of their daily routine. That the ward where my informants are employed also would be subject for change in the future is almost inevitable. I therefore wanted to investigate their reactions to a hypothetical restructuring project in the not so distant future. The evident tendency among my informants is still present; those who have been negative to the change would also oppose a new restructuring project:

Well, then I think that I've become devastated! Yes, I actually think so. Because...well, you have just been through a restructuring project, that's not even finished. And in my situation, if I should get the message about starting a new restructuring process, then it had to be the restructuring project all over again, I think I would have croaked (Margrethe)

Margrethe considers the thought of a new restructuring process to be completely devastating, and does not seem to even bear the thought of it. The existing project has not reached closure yet, and the start of something new would be hard to handle for Margrethe. Her attitudes to the process have been mainly negative, and she does not seem to have reached the commitment stage in her mastering of the change. Hence, she is reluctant to a new process. Halldis is more positively minded towards a new project:

Well, I guess I wouldn't have anything against it (...) It goes without saying, restructuring projects are very important, so I would have participated. But the issue was that there weren't allocated any time for us to have time, we weren't released from any tasks in any way (Halldis)

Halldis is positive to restructuring, and she recognizes the importance of taking part in such subjects. She would not oppose a possible new project, but the process in itself would have to be rearranged. The amount of time she spent in the project without any compensation from other tasks is exhausting, and it would have been necessary to release some other tasks in order to work with the project.

5.4.5 Analysis of the commitment stage

The belonging to the project has started to manifest itself among the employees, and they are ready to commit to the project. They are aware of the goals, and how to reach them (Scott & Jaffe, 1989, chap 3). Commitment is a stage, that when obtained, will continue until a new change is conveyed (*ibid*). Reaching commitment is the ultimate goal of any restructuring process. But the time it takes to get there varies a lot from person to person. This is also the case for my informants.

One of the focuses in the project, yet not formally stated, was to create a better understanding between the different locations. The workgroups were composed with that intention. This has been one of the most positive experiences my informants have had with the process. The cooperation went well, and they got to know each other on a whole new level. This created a greater understanding of their colleagues:

The process has contributed to change a lot of attitudes. There have been less regurgitation and more....it has influenced people to more constructive thinking (Berit).

The increased feeling of fellowship could also lead to a better patient treatment, as the employees get more eager in helping each other out when that is needed. The disappearance of negativity towards each other is also a sign of the members of the ward transiting from the denial and resistance stages towards the exploration and commitment stages. The learning outcomes of the project are also present. The most important was to find ways to strengthen the quality of the treatment of patients, and be able to give better services. And in order to do that, they have to get to know each other better and to work as a team. The distance between the two locations is not so evident any more:

I learnt something about my colleagues. Especially at [the other location] how they are doing and thinking. You get to know each other better, and see things somewhat differently (...) (Frida)

Teamwork is a distinctive feature of commitment. They are prepared to find new ways of working together (Scott & Jaffe, 1989, chap 3). My informants are dedicated to do their best in working together as a team, and not as two separate wards, which is a clear move towards commitment. This is one of the steps towards a successful restructuring project. The informants are hesitant when it comes to the success of the project. The main impression is that it have not come so much out of it, at least not in regard to the effort they put into it. They are aware of that the project is not entirely finished, and the outcomes might have yet to become evident:

Well, it isn't...it remains to see, for the time being, what will come out of it. We have straightened out a few issues. That wasn't... that were neat and easy to sort out. Both otherwise I don't see so many results. Yet. (Margrethe)

However, they know that the management and steering committee are still working on it. They are expecting to gradually see some results, and have not lost their lack of faith in the project, or restructuring projects as a whole. Because of the rapid growth and sudden changes in the health care sector, my informants would probably be involved with changes several times in their career. The attitudes to a new restructuring project in the near future were as expected; those in favour of restructuring, like Ragnhild, would welcome such an initiative:

I think I would have been positive. You know, there are changes all the time (...) I am very interested in constantly trying to improve things. There are always new elements, such as new equipment and new personnel. New knowledge, which you have to utilize as well as possible. Yes, I really think that I would have been positive (Ragnhild).

She regards change as being necessary in order to be able to improve their tasks, and to offer satisfactory treatment. Those who were strictly opposing the restructuring would not be rejoicing another project, and they do not consider it to be necessary. There the divide between my informants become evident in terms of attaining the commitment stage. I would say that most of my informants have reached it, or at least is on their way of reaching the commitment stage. They have had their relapses and negativity, but shows determination to the project and the desire to make it successful; in order to reinforce their ward. They are dedicated to their work place; most of them have worked there many years. They are therefore willing to try different approaches in order to preserve their ward. However, not all my informants are in the proximity of arriving at the commitment stage. This requires a lot from their managers. Since the employees are at different stages in their transition, the managers are responsible for different challenges. A restructuring process could be regarded as a very personal matter for those involved. In this case, the employees in one of the locations feared that their location would be shut down or incorporated in the other, larger section. With this apprehension, gaining commitment to a project is difficult. The notion of safety, being listened to and respected is an important issue here to get all the employees to reach commitment. The constant change in organizational life demands a lot from its participants. Ensuring the confidence and reliance from the employees is essential in order to managing and implementing successful change. This should also be the case in this restructuring project.

6. Concluding remarks

When spending my internship at a ward that was in the middle of a restructuring process I started wondering of how this affected the members. Through qualitative interviews with eight employees at a Norwegian hospital I wanted to focus on how employees in a hospital ward experienced to go through a restructuring project. People that undergo change often go through different stages in their transition process. The change curve theory of Scott and Jaffe depicts these stages, and that has been a framework for my thesis. I chose to structure the elements of my thesis around Scott and Jaffe's change theory, and the four stages of this transition grid: denial, resistance, exploration and commitment. The purpose of my research was to investigate how the employees experienced the restructuring, and to connect their responses and reactions to this the change curve.

Through the thesis I have tried to illuminate the research question: "*How do hospital employees' experience a restructuring process, and how do their reactions fit in accordance to Scott and Jaffe's change curve?*". The first part of the approached problem addresses the reactions of individuals when exposed to changes at their work place, and is connected with the last part of the problem; how these reactions could be put into a specified pattern of reactions.

The first stage in the change curve of Scott and Jaffe is *denial*. Here, the expected responses are withdrawal and attention turned to the past (Scott & Jaffe, 1989, chap. 3). My overall impression of my informants' initial reaction to the change is that they embraced the change, and did not neglect or deny it. I believe the reason for that is that they instantly regarded it to be an opportunity to bring forward what they found important, and to strengthen the ward as a whole. Information is essential for how the change is received; open communication could reduce and prevent rumours, anxiety and mistakes (Scott and Jaffe, 1989, chap. 4). Although the informants found the information to be straightforward for the most part, they still had complaints about insufficiency, detention and inconsistency. However, they considered the feedback to be reasonable, if demanded. Apart from one informant, Margrethe, who struggled with the change and used denial as a defence mechanism to comfort herself and avoid the reality, my informants have had a non-typical first response to the initiated change.

When the realities of change have started to sink in, the employees commonly enter the *resistance* stage. The anticipated attitudes at this stage are anger, depression and agony (Scott and Jaffe, 1989, chap. 3). The astonishing feature here was that most informants were not as reluctant to the change as I expected them to be. They considered the restructuring project as something important, and interesting to take part in, and regarded themselves as very positive. The resistance they expressed was not very profound, occurred later in the process, and was mostly due to increased work load or caused by the resistance among others. The latter here was a surprising discovery. Although they considered themselves to be positive, they thought of their colleagues as negative and resistant. Here the divide between the locations became very evident; as they were very concerned with the “us and them” – mentality, and thought of the others as being more reluctant to change. However, projecting the resistance on to others could have been easier than allowing themselves to feel that way, as their overt attitudes towards the change were positive. Willingness to change was considered important, and those who openly resisted the change encountered patronizing attitudes. The minority of my informants, who were very negative to the process, seemed to stagnate in the resistance stage, or have frequent relapses to this stage. The overall impression is nevertheless that overt resistance, and hence, the transition through the stages of the change curve is somewhat deviating from the norm.

As the employees start to get used to the change and enter the *exploration* stage, they become motivated and express a lot of energy, but confusion, chaos and over preparation is also expected (Scott & Jaffe, 1989, chap. 3). Most of my informants seemed to enter the exploration stage when the change was announced. They found that the possibilities to participate were good, and thought of their attendance as important and inspiring. The disadvantages they experienced were connected to the increased work load they encountered, because the clinical activity was not to be affected by the restructuring project, and there was not any dedicated time to work with the project. This brought along overtime and increased the stress level. However, the informants accepted this for the most part, as it went on for just a limited time, and they found the project interesting. They did however miss more support from the management in this. They were also somewhat dissatisfied with the managements handling of the restructuring process, both in terms of their vagueness, and

their exclusion of the employees in decision – making. Otherwise, they experiences with and transit through the exploration stage is fairly in accordance with that of Scott and Jaffe.

When the employees have reached commitment, they start to see the advantages of working together, develop a dedication to the process and eventually start looking for the next challenge (Scott & Jaffe, 1989, chap. 3). One of the most positive experiences my informants had with the restructuring project was the increased sense of knowledge and understanding of each other across the locations. The cooperation went well, and has led to extended effects such as reducing the obstacles to job rotation and helping each other out. These were also the main outcomes of the project. Beyond that, they have not seen any extensive results yet. Some informants thought of the project as too comprehensive measured in actual outcomes, and that it probably was not that necessary to go through a project of this size for the changes it has resulted in. However, they acknowledge that the process was important and perhaps also crucial for some of the employees. When it comes to the final test; whether they have fully reached commitment; their attitudes towards a new restructuring project stands as the measurement. The responses here were as expected; those who were positive towards this restructuring would also welcome a new project, while those who were reluctant would persist their resistance.

The reactions from my informants to the restructuring project were not fully as I expected them to be; most of them were more positive than anticipated. According to change theory, including Scott and Jaffe's, widespread resistance when a change is announced is common. When it comes to my informants' movement through the transition grid, this also deviates from that of Scott and Jaffe. The majority went straight trough to the exploration stage, although with a few cases of resistance in between, however not profound. Those of the informants who were negative seemed to maintain their resistance throughout the process, even though they participated along with the others. So even though they were negative, they were still a part of the change process. Scott and Jaffe's change curve is not fully applicable on my informants. One of the main arguments for this is the contents of the project. The degree of severity is not that high, and although some informants feared a hidden agenda, it has not resulted in any major changes. The possibility of a more typical response to change could occur if the mandate had been of more serious nature. Nevertheless, Scott and Jaffe states that the transition grid is a suggested reaction pattern, and even though most people go

through the four stages in every transition, some may move quickly while others are stagnant at different stages (Scott and Jaffe, 1989, chap. 3). The curve could however be put to use when looking at the informants' transition through the last two stages of *exploration* and *commitment*, due to the dedication most informants showed to the project during this latter stages. Managing change requires a lot from the managers. Effective leadership plays an important part in helping the employees move through the stages from denial to commitment (Scott and Jaffe, 1989, chap. 3). This is important, regardless of whether my informants had a "usual" transit through the curve or not. Special attention from the management should be directed towards those of the employees that have not yet reached commitment. This is an important management task that should not be forgotten in the struggle of managing change.

Not any change process is identical, and each of my individual informant's experiences with the restructuring process is unique. If I had interviewed eight other employees at the ward or even the original employees at a different stage in the process, their experiences might have been different. Therefore, there are learning effects and outcomes from every change project, and important to consider when evaluating the change and making plans for the future. An idiom states that variety is the spice of life. It seemed as though the change increased the "spice of life" for most of my informants. Positive outcomes such as increased understanding of each other compensate the negativity and resistance that was felt at times. This is a good starting point for fully implementing the changes or with time, even initiating another change. The tendencies of perpetual processes of change in the health care sector will probably increase in the future, and as an employee, it is important to be ready and willing to change. My informants' positive attitudes towards the restructuring process and changes per se, are in that respect a good basis for this.

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Managing Personal Change Workbook

[Available at url: <http://www.fade.nhs.uk/pit/workbookSHA.pdf>] Visited 18.02.2008

8. Appendices

Appendix I : Letter of information to informants (translated)

Letter of information to informants

I am a master student in Health Economics, Policy and Management at the University of Oslo. I am currently writing my master thesis about the subject “The employee’s experiences with a restructuring project”. With this study I want to investigate what experiences employees have as participants in a restructuring process, and which reactions this trigger within the individual.

I want to conduct eight interviews, and deeply dwell on each informant’s experience. The questions would, as an example, revolve around how you experienced the different stages in the restructuring project, what the focuses were, and different solutions and problems that rose along the way.

I want to use a tape recorder during the interview, to ensure that I get all the important topics that are mentioned. I will also be taking notes during the interview. The interview will last approximately 45 minutes.

As the interviews I want you as an informant to get acquainted with the following:

1. Your identity is anonymous. It will not be possible to put you in connection with the thesis at any stage. What ward the informants are connected with will not be revealed in the thesis.
2. All information from the interview will be treated with confidentiality. I, as the interviewer, am the only one with access to the data material.
3. Your participation is voluntary. Both the informant and the interview have mutual possibilities to withdraw from the interview without stating the cause any further. All the collected data about you will then be deleted.
4. If there should emerge some questions you don’t feel comfortable with, then you are not obliged to reply.
5. Recordings and notes will be saved until the master thesis is completed, and will then be obliterated.

If you have the opportunity to participate, then please sign the enclosed declaration of consent.

If you have any questions, please contact me by telephone 932 55 382, or send an email to annenbyb@medisin.uio.no

The thesis is stipulated completed 15. May 2008

Yours sincerely,
Anne Grethe Nybråten

Appendix II: Declaration of consent (translated)

Declaration of consent:

I have received information about the study of employees' experiences with a restructuring project, and I wish to participate in this.

Oslo, ____/____- 08

Signature Informant

Signature Interviewer

Appendix III: Interview guide (translated)

Interview guide

Background Information

Age:

Education:

Position:

How many years have you been employed at this ward?

Denial

How would you describe the restructuring project?

- Different phases, the purpose of the alteration, why was it conducted, how was it conducted, your reaction to this

When did you first hear about the project?

What was your initial reaction to the project?

How did you experience the information?

- In what ways were you informed, how was the quantity of information?
- What were the strengths and weaknesses in which you were informed?
- How could the information have been improved?

What was the focus in phase 1 of the project?

Resistance

How did your attitudes towards the project change during the course?

How did you perceive the project as a threat or a danger?

How would you describe your colleagues' attitudes towards the project?

Which signs of resistance did you see among your colleagues?

What were your reactions to this?

Could you describe any problems that rose during the project?

- When did these emerge? What were your reactions to them?

What was the focus in stage 2 of the project?

Exploration

How were the employees involved in the restructuring project?

- with participation, influence, decision-making

How did you participate in the project?

- before, during, afterwards

How would you describe the amount of your participation?

What opportunities or possibilities did you find in the project?

How do you think the management has handled the restructuring project?

What kind of consequences have the project had for you?

How was the clinical activity affected because of the restructuring project?

How was your work day changed because of the restructuring project?

How was your daily life affected because of the restructuring project?

Commitment

How did the collaboration work out in the project?

How would you say the work environment in the ward has developed during the project?

What solutions emerged from the project?

Do you think it was a successful restructuring project?

What kind of expectations did you have?

How could the restructuring project have been carried out differently?

What did you learn from the restructuring project?

If there were to be initiated a new restructuring project in six months, how would your reactions be?

Is there anything you wish to add or elaborate on?